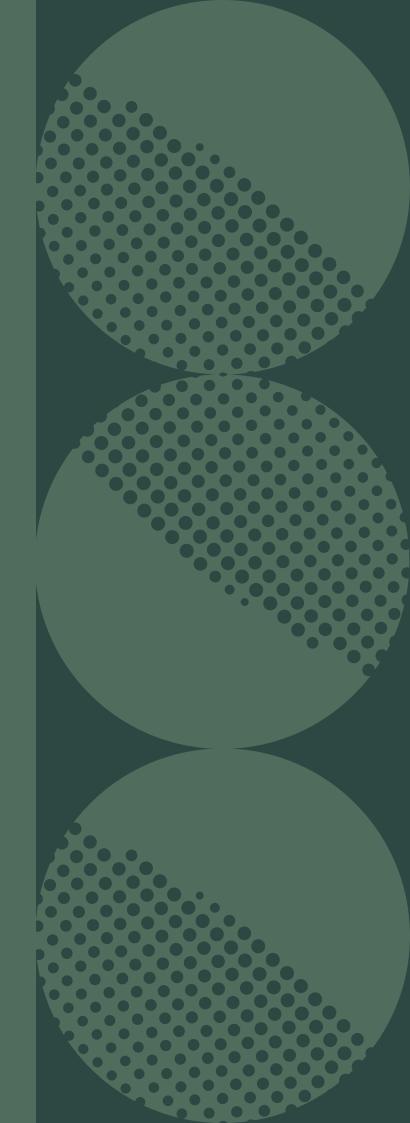


Annual Report 2021

At the intersection of drug policy, public health and human rights



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Who We Are and What We Do

We work at the intersection of drug policy, public health and human rights.

Harm Reduction International (HRI) is a leading non-governmental organisation (NGO) dedicated to reducing the negative health, social and legal impacts of drug use and drug policy.

We promote the rights of people who use drugs and their communities through research and advocacy, to help achieve a world where drug laws and policies contribute to healthier, safer societies.

We:

- O Monitor the availability of health and social services for people who use drugs;
- O Ensure that human rights are not violated in the name of drug control;
- O Advocate for the funding of lifesaving harm reduction interventions;
- O Convene the harm reduction community at our international conference.

Our work comes together at our biennial international conference, which is the main global forum for the exchange of information and best practices at the intersection of drug policy, public health and human rights.

- O Our Public Health and Social Policy team conducts original research and analysis to track developments in harm reduction and ensure that people who use drugs have the health and social services they need.
- O Our Human Rights and Justice team monitors rights abuses committed globally in the name of drug control, and advocates to promote the human rights of people who use drugs and their communities.

O Our Sustainable Financing team provides tools, strategic analysis and evidence to advocate for the funding of harm reduction; including campaigning for the redirection of funding from ineffective drug law enforcement to harm reduction and tracking global HIV and harm reduction funding.

We are an NGO with Special Consultative Status with the Economic and Social Council of the United Nations. We actively participate in international and regional fora and initiatives, to strengthen harm reduction advocacy around the world. These activities support the achievement of the organisation's strategic objectives.

To advance our United Nations (UN) level advocacy, HRI contributes to the Vienna NGO Committee on Drugs, the UNODC Civil Society Group on Drug Use and HIV, and the World Health Organization Working Group on Hepatitis and Substance Use. HRI is an invited, expert member of the Strategic Advisory Group to the United Nations on HIV and Drug Use (SAG). We also contribute to the European Union (EU) Civil Society Forum on Drugs, the United Kingdom Harm Reduction Working Group, and the Correlation European Harm Reduction Network.

We are members of STOPAIDS, the World Coalition Against the Death Penalty, and the Global Fund Advocates Network (GFAN).



Letter from the Executive Director

2021 marked our 25th year as an organisation. We have grown from a small group in Liverpool showing international visitors a bold harm reduction approach, to a global leader in analysis, advocacy and convening the sector. There have been great strides in the recognition of the role of health and human rights in the response to drugs. We are proud to be part of a dynamic, intersectional movement and proud to follow on from the work started by the courageous harm reductionists before us.

We were fortunate to have been able to celebrate our history and legacy together, with many of the people who have played an important role in HRI's growth, and in the global movement for harm reduction. As we celebrate the progress in harm reduction and drug policy reform, we are also acutely aware of how much remains to be done. HRI's staff, trustees and consultants hold the ambition and skills to drive forward our advocacy for the dignity, health and rights of people who use drugs.

We are committed to advocating for an understanding and practice of harm reduction that is inclusive and expansive, which recognises the agency of individuals and communities, and is rooted in justice and compassion. In 2021, we worked on position papers, advocacy briefs and research to contribute to this expansive definition of harm reduction, and will continue to do so in the years to come. In our work we centre lived experience and geographically diverse expertise as

critical parts of the future of the harm reduction and drug policy reform movements.

While we continued to grapple with the ongoing COVID-19 pandemic, we also forged new ways of working, both in policy and everyday practice. We led ground-breaking research on the impact of the COVID-19 pandemic upon criminalised and marginalised groups, including people who use drugs. We challenged the encroachment of security personnel in government pandemic responses, based on our experience tracking the negative impact of punitive responses to drug use. Decades of drug control demonstrate that stigma, surveillance and policing do not foster healthy, safe communities.

We ended the year on a sparkling high, with our first ever major online event. Constellations: An Online Festival on Drugs and Harm Reduction fostered exchange between more than 1000 participants from 73 countries. Through panels, interviews, poetry, film and more, we talked about science, justice and pleasure. The festival and the new connections resulting from it left us inspired and energised, ready to sustain our research and advocacy for human rights and lifesaving harm reduction services.

Naomi Burke-Shyne Executive Director

Celebrating 25 years of Harm Reduction International















Constellations: An Online Festival on Drugs and Harm Reduction

Our Work

Constellations: An Online Festival on Drugs and Harm Reduction



We wanted to continue to bring the harm reduction community together but in ways adapted to the context of the COVID-19 pandemic

In November 2021, we held <u>Constellations: An Online</u> <u>Festival on Drugs and Harm Reduction</u>, based around the themes of science, justice and pleasure.

For over three decades, we have convened the harm reduction and drug policy movements at the Harm Reduction International Conference – the main global forum for the exchange of information at the intersection of human rights, public health and drug policy. In 2021, we wanted to continue to bring the harm reduction community together but in ways adapted to the context of the COVID-19 pandemic. Over nine days, through panels, fireside chats, film, poetry, and more we gathered online and explored emerging issues such as harm reduction for stimulant drugs, decolonising drug policy, ethical cannabis policy, and psychedelic justice.

The festival was opened by Sir Elton John and David Furnish, Chair of the Elton John AIDS Foundation, talking about what harm reduction means to them and making a compelling case for why governments

must fund harm reduction services as part of their HIV responses. Headliners included Nobel Laureate Mario Vargas Llosa, British journalist and political pundit Ash Sarkar, Prof Carl L Hart of Columbia University, author and New York Times columnist Maia Szalavitz, Drug Policy Alliance founder Ethan Nadelmann, Prof David Nutt of Drug Science, and author and academic Dr Kojo Koram.

Over 1000 people from 73 countries attended the festival. Participants reported feeling connected and motivated, and many spoke of the safe space the festival offered and likened it to the experience of attending the Harm Reduction International Conference.

The success of Constellations, HRI's first large scale online event, has given us a blueprint for coming together online. Reflecting on the rapid pace of change in the world around us, Constellations also set a benchmark for adapting to pandemic disruptions, increasing inclusivity and accessibility, and testing new approaches which reduce carbon emissions.



















NS AN ONLINE FESTIVAL ON DRUGS & HARM REDUCTION

















Our COVID-19 Response

Our Work Our COVID-19 Response



We recognised the parallels between the punitive war on drugs and securitised and militarised responses to COVID-19

COVID-19 and associated government responses (including the introduction and expansion of emergency and executive powers) have had a particularly negative impact on vulnerable populations, where new policing powers, arrests and detention have exposed those already visibly poor and discriminated against to greater health risks; people caught up in criminal justice systems have been placed at significantly higher risk of ill health and human rights abuses. Increased surveillance serves to further oppress those already criminalised.

We recognised the parallels between the punitive war on drugs – a securitised response to a health issue – and securitised and militarised responses to COVID-19 and began our work to develop evidence-based and rights-centred counter-narratives to resist the over-expansion of emergency powers. We worked with partners to ensure accountability remains central to government responses, with specific attention to the health and rights of the most vulnerable groups in society, drawing on lessons from the war on drugs.

As part of this work, we released the report, Caught in the Crossfire: Health and human rights impacts of COVID-19 measures on people who use drugs in Indonesia and the Philippines. The report elevates the experience and expertise of people who use drugs on effective, human rights centred health responses and clearly illustrates the disproportionate impact that securitised COVID-19 responses had on the health and rights of discriminated and marginalised communities. We are proud to have partnered with communities of people who use drugs, who led the research and provided detailed analysis on the findings of the surveys carried out in their respective countries. We also released a report in partnership with the Asia Centre documenting the securitisation of COVID-19 health protocols by five countries in Asia. We presented our findings to parliamentarians and called for leadership from elected officials on rights-based pandemic responses at the UNITE Global Summit 2021.

At the end of 2021, we released the findings of the **first-of-its-kind global mapping of vaccines in prisons**, in partnership with Penal Reform International, contributing evidence to the global dialogue on vaccine inequity.



Decolonising Drug Policy

Our Work Decolonising Drug Policy

Speakers from Bolivia, Colombia, India, Jamaica, Kenya, Mexico, New Zealand, South Africa, the UK and the US explored the racist and colonial history of the global war on drugs

Globally, Black, Brown and Indigenous people are disproportionately targeted for drug law enforcement and face discrimination across the criminal system. They face higher rates of arrest, prosecution and incarceration for drug offences.

The global drug war is rooted in a history of racism and colonialism. In order to begin to dismantle these destructive policies, our work seeks to raise awareness of the racism and colonialism underlying international drug control and challenge its impact on the health and human rights of individuals and communities.

In 2021, along with our allies in the drug policy reform movement around the world, including Dejusticia, Drug Policy Alliance, the International Drug Policy Consortium, Release, the Transnational Institute and Voices of Community Activists and Leaders (VOCAL) Kenya, we held a series of webinars exploring how we can decolonise drug policy. Discussions covered: **challenging racism and colonialism through drug policy reform**, the war on drugs and the denial of Indigenous rights and why the role of the US in global drug policy must change.

Across these discussions, speakers from Bolivia, Colombia, India, Jamaica, Kenya, Mexico, New Zealand, South Africa, the UK and the US explored the racist and colonial history of the global war on drugs, described its compounded and intergenerational impact on Black, Brown and Indigenous people, and strategised on how drug policy reform can be used as a tool to dismantle racism and colonialism. Discussions culminated in an article published in the Harm Reduction Journal, and the webinar series has been accompanied by blogs and articles written by HRI staff and journalists.

Advocating for Harm Reduction Funding

Our Work

Advocating for Harm Reduction Funding

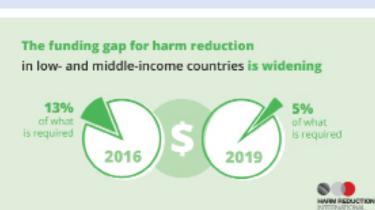
For the last fifteen years, HRI has tracked global funding for harm reduction, including support provided by international donors and domestic governments, and the impact this funding has had on HIV amongst people who use drugs. In May 2021, following eight months of data gathering and analysis, we released our latest findings on the state of harm reduction funding in our report, Failure to Fund: The continued crisis for harm reduction funding in low- and middle-income countries. Since we started monitoring harm reduction funding, the results have been consistently dire. We have seen the crisis for harm reduction funding in low- and middle-income countries worsen to the point that funding currently committed to harm reduction amounts to just five percent of the amount required in low- and middle-income countries. We also found that the funding gap is growing; in our 2019 report on the subject we found that funding was 13 percent of what was required.

We wanted governments and donors of harm reduction to take action to respond to this funding gap, so we hosted the Leaders Convening, the first ever meeting of major harm reduction funders focused on the inadequate funding for harm reduction, held in partnership with UNAIDS. Winnie Byanyima, Executive Director of UNAIDS, opened the event. We successfully brought together high level representation from key harm reduction donors, and the discussions from the day supported more coordination between funders and gave us important insights and inroads for follow up advocacy.



Since we started monitoring harm reduction funding, the results have been consistently dire

Funding for harm reduction is only 5% of the level required in low- and middle-income countries



We cannot end AIDS without communities.

Yet funding for community-led organisations is less than 7% of total harm reduction funding from international donors.





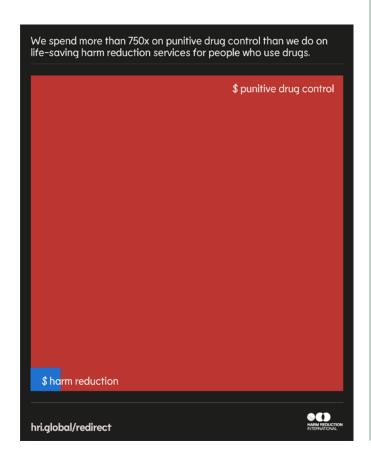


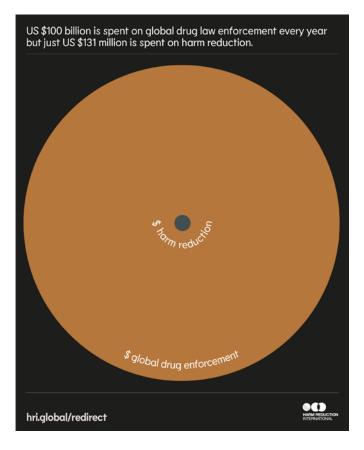
This monitoring of harm reduction funding also **provided key data for The Global Drug Policy Index** (**GDPI**) – a new and unique accountability tool that documents, measures and compares national-level drug policies, including the funding, availability and coverage of harm reduction interventions. The GDPI is a project of the Harm Reduction Consortium, of which HRI is a member.

In 2021 we also supported community-led advocacy for harm reduction funding in Latin America and strengthened the involvement of people who use drugs in related decision making. The Global Fund to Fight AIDS, Tuberculosis and Malaria (The Global Fund) is the largest funder of harm reduction worldwide and has long influenced the availability of funding for HIV/ AIDS in Latin America. Along with the Latin American Network of People who Use Drugs (LANPUD), we looked into representation and mobilisation of people who use drugs within the funding structures of the Global Fund in 11 countries in Latin America. Despite the requirement that key populations affected by HIV participate within these structures, people who use drugs were not represented in any of the 10 Latin American

Country Coordinating Mechanisms (CCM) for which we were able to access data. We worked with LANPUD to bring attention to the need for improved representation and to support networks of people who use drugs to engage with relevant Global Fund processes and build solidarity with other social movements. LANPUD went on to achieve the first appointment of a person who uses drugs to a CCM. This initiative was at the request of LANPUD and supported by the Global Fund's Community Rights and Gender Strategic Initiative.

As part of our work to increase investment in harm reduction, we have been advocating for the redirection of funding from ineffective drug law enforcement towards health and harm reduction programmes. Building on previous research with partners, we released a briefing that contrasts drug war expenditure and harm reduction investment in Thailand, Indonesia, India, Nepal, Cambodia and Vietnam, and offered a global perspective on this funding imbalance. This builds evidence for effective advocacy for investing in harm reduction and the redirection of funds on national, regional and international levels.





Aligning Drug Policy With International Human Rights

Our Work

Aligning Drug Policy With International Human Rights

HRI has monitored the use of the death penalty for drug offences worldwide since 2007. Numerous international authorities, human rights bodies and legal scholars have reaffirmed the illegality of the death penalty for drug offences. Yet, at least 35 countries and territories retain the punishment in law. We published our annual report, The Death Penalty for Drug Offences: Global Overview 2020 in early 2021. We found that executions decreased significantly, primarily driven by an unofficial moratorium on executions for drug offences in Saudi Arabia - which routinely applies the death penalty for drug offences. However, despite COVID-related disruptions to court proceedings, we also found that death sentences for drugs continued to be issued at alarming rates, including via Zoom, making a grotesque and inhumane practice even more inhumane. Our report generated significant press including by Agence France-Presse and in Vice, CNN Arabic and Al Jazeera.

We continued to foster and strengthen a network of organisations and experts from South Asia and the Middle East leading on death penalty abolition and criminal justice reform which evolved from a regional meeting in Kathmandu in 2019. In 2021, the Network conducted a number of joint advocacy initiatives, carried out innovative research on how poverty and criminalisation enhance vulnerability in the context of the death penalty, and shared expertise, resources and strategies on abolition of the death penalty. Coordination among network members with the UN Working Group on Arbitrary Detention led to the inclusion in the Working Group's report on arbitrary detention and drug policy of evidence from South Asian and Gulf

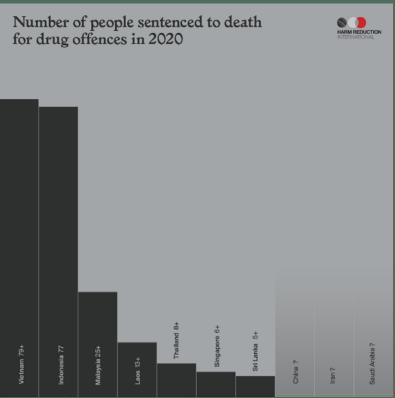


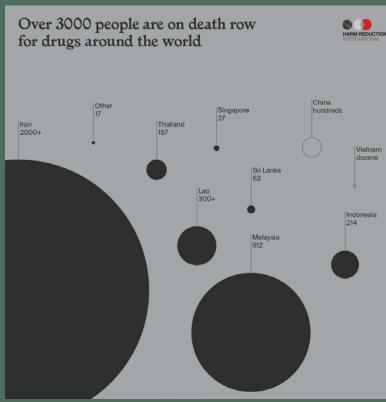
Death sentences for drugs continued to be issued at alarming rates

countries – both on compulsory drug detention and on the death penalty for drug offences.

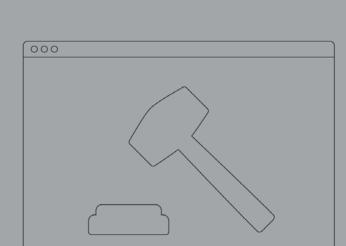
We worked with human rights expert, Ambika Satkunanathan, on a report on drug control, detention and treatment of people who use drugs in Sri Lanka, which documented in detail the types of human rights violations that are taking place in the name of the war on drugs in the country. Over the past decade, the government of Sri Lanka has adopted a militarised approach to drug control, with the military playing an increasing role in drug law enforcement. The report sparked an important conversation and generated press in the country. It provided the basis for advocacy at the United Nations Human Rights Council, where we delivered an oral statement, and will continue to be an important advocacy tool for the fight against the punitive war on drugs in the country in the coming years.

Since 2020, we have hosted the Lawyering on the Margins network, a global network of lawyers and community paralegals serving marginalised population across the world, including people who use drugs, people living with HIV, LGBTQIA+ individuals and sex workers. In 2021, the network provided small grants to strengthen access to justice for marginalised groups; a network member in the Philippines carried out a paralegal training for women who use drugs and Indonesian lawyers advanced a judicial review on the medical use of cannabis. The LOTM network also participated in RightsCon 2021 to discuss safe and secure digital innovations in providing access to justice for marginalised groups.









THE DEATH PENALTY FOR DRUG OFFENCES: GLOBAL OVERVIEW 2021



Advocating for an Inclusive Approach to Harm Reduction

Our Work

Advocating for an Inclusive Approach to Harm Reduction



We published a slew of briefings to help us advocate for an expansive and inclusive definition of harm reduction

In 2021, we published a slew of briefings to help us advocate for an expansive and inclusive definition of harm reduction. This included a briefing on integrated and person-centred harm reduction services which drew on case studies of harm reduction services in Australia, Brazil, Canada Kenya, Nepal and Portugal. We defined an integrated harm reduction service as a site or an organisation that provides one more 'traditional' harm reduction services (such as opioid agonist therapy or a needle and syringe programme) alongside other health and social services, thereby ensuring that a wide range of services are available and accessible to their clients. This briefing, which was accompanied by videos from harm reduction service providers, illustrated why integrated services are effective, accessible and adaptable - building the evidence for their wider adoption around the world. In particular, it highlighted how integrated services – especially those that are community led – are better placed to provide holistic care and support.

We released a <u>briefing</u> on **chemsex** and harm reduction for gay men, other men who have sex with men. Gay men and other men who have sex with men and people who use stimulants are among the communities insufficiently served by existing or traditional harm reduction services. In particular, harm reduction responses for chemsex are inadequately implemented. The briefing provided evidence of the need for such services, as well as recommendations for their implementation. These include peer leadership, integrated services and online information. We support exchange on chemsex amongst other topics on our global discussion platform on harm reduction for stimulants.

We also released a <u>briefing</u> on **prisons** titled, *The Harms* of Incarceration: The evidence base and human rights framework for decarceration and harm reduction in prisons, in which we established that: the first step in reducing harm associated with incarceration is to reduce the reliance on incarceration itself; providing harm reduction is a human rights obligation; harm reduction services in prisons are an essential, effective and safe public health measure; and that people in prison are currently severely underserved by harm reduction services.

In response to the conflation of drug use and mental health in ongoing global discussions, including among key international donors of harm reduction, we released a <u>statement</u> with the International Network of People

who Use Drugs emphasising that drug use and drug dependency itself is not a mental health condition. We did this to reiterate the important point that while drug use and mental health issues can co-occur, conflating the two is inaccurate, stigmatising and can have long term harmful consequences to the community of people who use drugs, including removing the agency of people who use drugs to make decisions about their own bodies and lives.



Photo courtesy of: Centro de Convivência É de Lei



Photo courtesy of: CAHMA (Canberra Alliance for Harm Minimisation and Advocacy)

Governance: Our Board of Trustees

Harm Reduction International is governed by a board of trustees under a foundations model of governance, in which the directors are also the members of the organisation. Board appointments are made by resolution of the board itself.

Members of the board of directors also serve as trustees of Harm Reduction International, in compliance with the Charity Commission for England and Wales.

Our board of trustees as of 31 December 2021 were:

- O Ms Lucy Burns (Chair)
- O Ms Saumya Kailasapathy (Vice Chair)
- O Ms Olga Belyaeva
- O Prof. Alex Stevens

- O Dr. Kojo Koram (Secretary)
- O Ms Raminta Stuikyte
- O Mr Oluseyi Kehinde
- O Mr John Porter (Treasurer)

Our Donors

In 2021, Harm Reduction International benefitted from the support of:

- O Open Society Foundations
- O The Robert Carr Fund for Civil Society Networks
- O The Global Fund to Fight AIDS, Tuberculosis and Malaria
- O The Federal Office of Public Health, Switzerland
- O MAC AIDS Fund

This is in addition to collaboration and partnerships with UNAIDS, the World Health Organization, and the UN Office of Drugs and Crime.

Statement of Financial Position

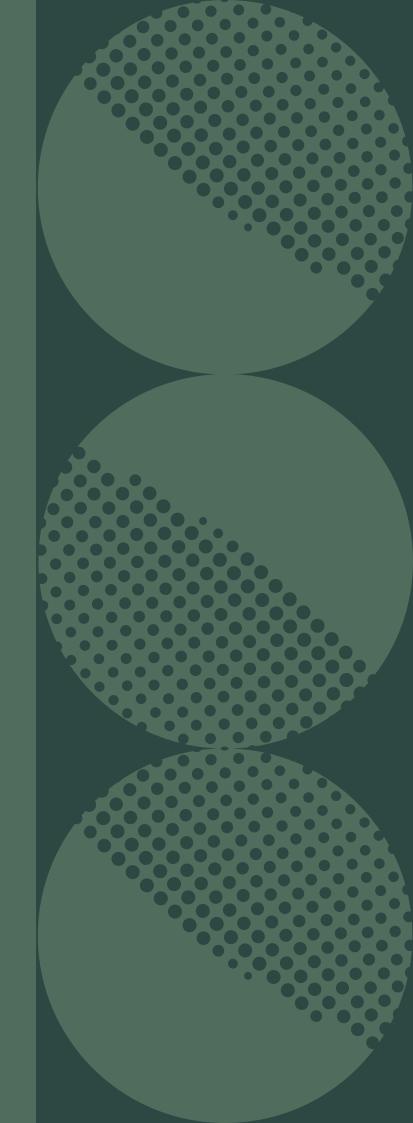
Balance sheet as at 31 December 2021

	2021	£	2020 £
Fixed Assets			
Tangible Assets	£1	8,931	£28,419
Total	£1	8,931	£28,419
Current assets			
Debtors	£30,555	£83,536	
Cash at bank and in hand	£882,388	£511,288	3
Total	£912,943	£594,824	1
Liabilities			
Creditors: amounts falling due within one year	(£769,322)	(£434,59	5)
Net Current Assets (liabilities)	£1	43,621	£160,229
Total net assets / (liabilities)	£1	62,552	£188,648
The funds of the charity			
Restricted income funds	£1	01,696	£176,703
Unrestricted income funds	£6	50,856	£11,945
Total charity funds	£1	62,552	£188,648

Statement of Financial Activities

(incorporating income and expenditure accounts)
For the year ended 31 December 2021

	Unrestricted Funds 2021	Restricted Funds 2021	Total Funds 2021	Total Funds 2020
Income from				
Donations and legacies	£101,365	-	£101,365	£48,005
Charitable activities	£326,683	£395,334	£722,017	£849,951
Investments	£23	-	£23	£94
Total Income	£428,071	£395,334	£823,405	£898,050
Expenditure on				
Charitable activities	£379,160	£470,341	£849,501	£849,501
Total expenditure	£379,160	£470,341	£849,501	£849,501
Net income/ (expenditure) for the year	£48,911	(£75,007)	(£26,096)	£83,071
Transfers between funds	-	-	-	-
Net movement in funds	£48,911	(£75,007)	(£26,096)	£83,071
Reconciliation of funds				
Total funds brought forward	£11,945	£176,703	£188,648	£105,577
Total funds carried forward	£60,856	£101,696	£162,552	£188,648



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www.hri.global