KEEPING HARM REDUCTION

How communities held the line when systems collapsed

Evidence From South Africa’s Rapid Assessment 27 November 2025

THE COLLAPSE IN 90 DAYS
A System Shock - The Funding Cuts Hit South Africa Fast

40 USAID-funded projects terminated

8,493 frontline workers retrenched

5,000+ PWID lost OST/NSP

166,354 KP clients affected

353 clinics showed breakdown

Bottom line: "There was no transition plan. Services stopped overnight."

When Services Collapse, People Don’t Stop Needing Care

“Overdoses increased within days”

“We became the clinics.”

“Clinicians were crying.”

“We’ve had so many RIPs.”

“I defaulted for three months.”

Bottom line
Cuts land hardest on those already carrying the most.

This pattern mirrors the Global State findings

Intersectional Harms → Intersectional Impacts

PWID: OST + NSP collapse

MSM: Engage Men’s Health closure

Sex workers: PrEP interruptions, violence

Trans communities: Loss of navigators

Migrants: Treatment refusals

What Held the System Together

Community-Led Mitigation Prevented a Humanitarian Crisis

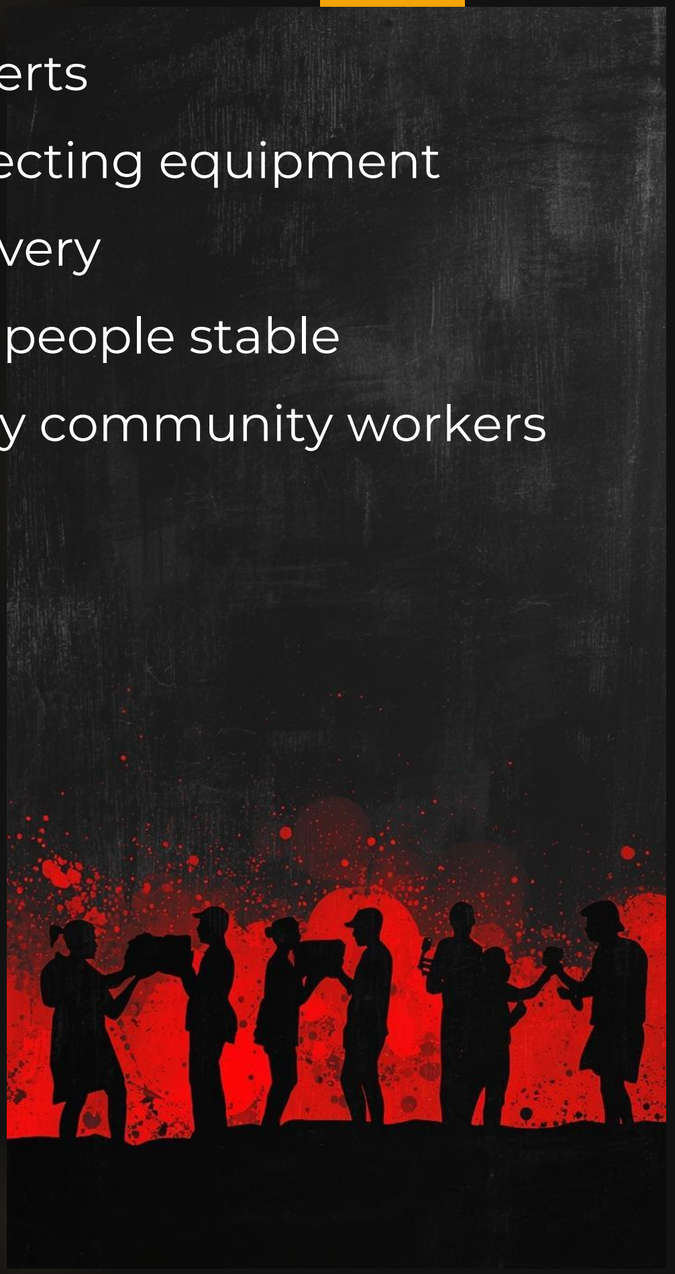
WhatsApp overdose alerts

Peer distribution of injecting equipment

Home methadone delivery

Peer rationing to keep people stable

170+ clients re-linked by community workers



These were heroic, lifesaving adaptations - not a sustainable model.

Evidence Works - Even When Systems Don’t

Viral suppression: 88%

Harmful drug use: 79% → 57%

ART retention: 40% → 90%

Stimulant harm reduction is effective. The gap is political, not scientific..

What South Africa Must Do Now

Three Immediate Priorities for Continuity

1. Secure domestic continuity budgetsFor OST, NSP, PrEP using WHO's new guidance.

2. Protect & fund community-led systems Peer workforce, re-linkage, overdose alerts.

3. Integrate harm reduction into NPHC Indonesia's model shows it is possible and scalable.

What South Africa Proved

- Harm reduction didn’t fail - funding did.
- Communities didn’t collapse - they carried the system.

The question is no longer whether harm reduction works. It does. The question is whether South Africa will act now to safeguard it.

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