PRESS RELEASE

The Global ‘War on Drugs’ Kills: Legal Reform Needed

New Delhi: Worldwide an estimated 16 million people inject drugs, and three million of them are living with HIV. In India, HIV prevalence in this group is 24-times that of the general population. Though progress has been made, the HIV epidemic continues to be fueled by laws, policies and practices that impose harsh penalties and law enforcement measures on people who use drugs.

Initially based on the belief that tough enforcement would stifle a multi-billion drug trafficking industry, this punitive approach has failed to reduce levels of drug use. Moreover, it has stigmatized a large number of people, impeding their access to lifesaving health services that are proven to prevent HIV infections and reduce harms related to injecting.

June 26th is observed as the United Nations’ International Day against Drug Abuse and Illicit Trafficking. India HIV/AIDS Alliance joins the global advocacy campaign Support Don’t Punish that is being launched in 21 countries today with solidarity actions in Yamuna Bazaar and Jahangirpuri in Delhi. This campaign calls on governments to put an end to an expensive ‘War on Drugs’ that fuels HIV, tuberculosis and hepatitis epidemics, causes human rights violations and ultimately fails to tackle the world’s drug problem.

In India, the lack of access to services can effectively be a death sentence for people who inject drugs. While some parts of the country, especially the Northeast, have a range of services for this population, most other states have inadequate access. Drug users are dying for the need of treatment for a variety of health problems, including Hepatitis C, HIV, overdose, and detoxification. Some of these services remain controversial and not part of India’s basic service package, while others are often not available in areas of need.

Expressing solidarity with the campaign, Sonal Mehta, Director, Policy & Programmes, India HIV/AIDS Alliance said, “Rather than demonizing people who use drugs, we should humanize them. Rather than jailing them, we should get them the treatment they need. Rather than punishing them, we must support them.”

Current levels of investment are not enough to fill the gap. International donors, UN agencies and governments need to increase funding and direct resources to ensure targeted services for harm reduction and HIV programmes for people who use drugs and explore scale up of effective opioid substitution therapy (OST) services like buprenorphine and methadone.

As part of this momentum, the Support Don’t Punish campaign calls for the removal of legal sanctions for low-level drug offences, and the scale-up of scientifically proven health interventions. These include a package of ‘harm reduction’ services that have been fully endorsed by the World Health Organisation (WHO), the Joint United Nations Programme on HIV/AIDS (UNAIDS), and the United Nations Office on Drugs and Crime (UNODC). In order to do this, governments must remove the policy, legal and financial barriers that exist, as well as any political or ideological objections.

Ann Fordham, Executive Director of the International Drug Policy Consortium, a lead partner in the campaign believes that “This ‘war’ has proven to be unwinnable and unjustifiably expensive – both
in terms of financial and social health costs. It is time for policy makers to repair this damage, and to leave behind the harmful politics, ideology and prejudice. It is time to prioritise the health and welfare of people who use drugs, their families and communities.”

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About India HIV/AIDS Alliance:
India HIV/AIDS Alliance (Alliance India) is a diverse partnership that brings together committed organisations and communities to support a sustained response to HIV in India. Complementing the national programme in India, the organisation works through capacity building, knowledge sharing, technical support and advocacy. Through our network of partners, Alliance India supports the delivery of effective, innovative, community-based HIV programmes to key groups affected by the epidemic.

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