



DRUG DEMAND REDUCTION POLICIES:

Promoting rights, gender and social inclusion approaches in care services and territorialisation proposals in highly vulnerable communities.

ddressing problematic drug use is a matter of public health, but also of social cohesion, as it affects populations in contexts of vulnerability and social exclusion, thus exacerbating inequalities. From an epidemiological perspective, most of the people affected by drug use are men, but women tend to suffer heavier and more widespread impacts. Poverty and marginalisation fuel the cycle of negative consequences for individuals and communities, since drug use can lead to a considerable deterioration in living conditions, but also generate associated processes of stigmatisation and social exclusion. These phenomena constitute barriers to access to the services of prevention, comprehensive care and reduction of the harm suffered by women and the LGBTQI+

community, among other vulnerable groups.

2 implementing PARTNERS: FIIAPP (International and Ibero-American Foundation for Administration and Public Policies) EUDA (European Union Drugs Agency)

2 technical PARTNERS: ALC - Agirre Lehendakaria Centre (research centre at the University of the Basque Country).

RAISSS (American Network for Intervention in Situations of Social Suffering).



ALIGNED with REGIONAL POLICIES regarding demand

Hemispheric Plan of Action on Drugs 2021-2025, OAS/CICAD.

Pillar 2 on measures of prevention, treatment and recovery support: objectives 1 and 5.

EU Drugs Strategy 2021-2025, European Council.

Strategic priorities 5, 6 and 7.



WHAT STRATEGY DO WE FOLLOW

REGIONAL SCHEME

- Three Working Groups have been formed in which 26 countries have participated to promote reflection based on:
 - training processes;
 - exchange of experiences and good practices;
 - preparation and adaptation of guides on social inclusion and

intervention models and experiences from the territory.

NATIONAL APPROACH

21 national actions promoted in 14 countries, with goals and support routes.

COORDINATION WITH CIVIL SOCIETY

coordination with regional networks:

- RAISSS (present in 8 LAC countries).
- RIOD (Ibero-American Network of NGOs working on Drugs and Addiction).

INNOVATION

Innovation laboratories are promoted as experimentation spaces for the development of prototypes that respond to the challenges that exist in the countries.



IN WHICH AREAS DO WE WORK



The COPOLAD programme is firmly committed to strengthening national plans and strategies on drugs, through the improvement of prevention and care systems for people with problematic drug use, from a comprehensive perspective. This entails strengthening approaches, processes and methodologies that assume the gender, rights and social inclusion approach as a decisive factor.

Additionally, this third phase of the programme promotes processes of territorialisation of policies, programmes and services in communities of high social vulnerability, allowing effective and contextualised responses. Through specific projects, this territorial and community approach also promotes learning and lessons learnt that can be "scaled" to the national level.



IMPROVEMENT OF TECHNICAL KNOWLEDGE ON PREVENTIVE, HEALTH AND SOCIAL RESPONSES TO DRUG USE

In **REGIONAL** terms, the EUDA is contributing to strengthening technical skills in prevention, based on the adaptation of several European training

materials to the reality of Latin America and the Caribbean. Progress has been as follows:

- adapted versions of the European Prevention Curriculum (EUPC) were promoted (in Portuguese, Spanish and English). three pilot training programmes were carried out, and focus groups are planned to discuss the contents adapted from the EUPC. Subsequently, it is planned to activate a virtual learning community.
- In addition, "Health and Social Responses to Drug Problems: a European Guide" (2017), which includes thematic "mini-guides", is being adapted to the context of Latin America and the Caribbean. In coordination with partner countries, three mini-guides have been prioritised for adaptation, namely those on: i) action framework for implementing health and social responses; ii) cannabis; and iii) gender. Two webinars on health and social responses are planned to be held.
- 105 people from technical teams of public institutions in LAC have participated in the training processes promoted by the EUDA to date (77 women and 28 men).



SUPPORT FOR THE QUALIFICA-TION OF COMPREHENSIVE CARE SERVICES, HARM REDUCTION AND SOCIAL INCLUSION, IMPRO-VING ACCESS FOR WOMEN AND PEOPLE IN VULNERABLE SITUA-TIONS

From a **REGIONAL** perspective, based on the activity of the working groups, the main advances have been:

Exchange of experiences in prevention, harm reduction, social inclusion and mainstreaming of the gender approach (including good practices of public programmes

- and civil society organisations in Latin America, the Caribbean and the EU)
- <u>Two tools</u> are being prepared, which the programme will make available to countries:
 - I. Guide to the Social Inclusion of Drug Users provides guidance on incorporating social inclusion into the planning, implementation and monitoring of programmes, services and policies. It includes a conceptualisation of the paradigm shift entailed by social inclusion, a State of the Art in the region, and a proposed methodology with a set of tools (diagnostics, roadmap, mapping of agents, collection of illustrative experiences and indicators).
 - II. Policy Paper on "Women, Drugs and Stigmatisation", in order to give visibility to the effect of stigma on problem users and people tied to the world of drugs, especially women. The aim is to put together a shared vision of this phenomenon to contribute to the positioning of this problem on the regional agenda and so facilitate its being addressed at the national level.

At the **NATIONAL** level, COPOLAD III provides technical support specifically to six countries in the region to improve comprehensive care and harm reduction services (including action plans, approach guides, tool boxes, as well as innovation laboratories, the latter led from the Agirre Lehendakaria Centre):

CHILE: Support is provided to SEN-DA, the national drug agency, in its development of a social innovation laboratory to improve the State's response minors under State protection (children, adolescents and young people at risk). As a result of this process, five innovation prototypes have been identified:

- I. Open digital display system.
- II. National laboratory network.
- III. SENDA multilevel learning community for social innovation.
- IV. Family residences for mental health support for children and adolescents.
- V. Youth Portfolio.
- COLOMBIA: COPOLAD supports the Ministry of Justice and Law (MJD) in coordination with the Ministry of Health and Social Protection, departmental governments and civil society in the local implementation of the national drug policy, based on the design and installation of a network of community harm reduction systems in five cities with a high incidence of drug injection (Armenia, Cúcuta, Medellín, Dosquebradas and Pereira).

Two social innovation laboratories have been activated to reduce the vulnerability factors of young people linked to micro-trafficking and problematic use of drugs and psychoactive substances in Santander de Quilichao and the urban area of Cali.

- ▶ ECUADOR: assistance to the Secretariat of the Inter-institutional Committee on Drugs seeking to describe the telephone hotline service for mental health and problematic drug use (Line 171) provided by young psychology graduates, which has high staff turnover.
- MEXICO: Assistance to the National Commission on Mental Health and Addictions (CONASAMA) is geared to comprehensive care and harm reduction services in relation to synthetic opioids (fentanyl and methamphetamines) and access for the LGBTQ+ population, through three tools: a) technical guide for fentanyl and methamphetamine consumption (intended to care for the vulnerable population in the Northern

border region); b) field work guide for addressing consumption of the sexually diverse population; and c) 2 tool boxes for specialised social and healthcare centres.

- URUGUAY: Assistance is provided to the National Drug Board (JND), the National Rehabilitation Institute (INR) and the Ministry of the Interior's National Directorate of Alternative Measures in improving the national drug policy and prison care services. Help is provided in developing two National Plans to Address Drug Use for people in prison and people upon whom alternative sanctions to prison have been imposed. The Guide to Addressing and Treating Drug Use in Prisons is being updated.
- PERU: We support the National Commission for Development and Life without Drugs (DEVIDA) in promoting an experimentation space aimed at the development of an Early Warning System (SAT) to protect native communities in territories affected by the invasion of settlers in illicit businesses (illegal logging and coca cultivation) in the Flor de Ucayali community (Peruvian Amazon). Four blocks of

innovation prototypes have been identified, which coordinate public services (anticipatory system of alert indicators, patrolling, connectivity,) with community actions (indigenous surveillance and CSAD initiatives) as well as involving institutionalisation and escalation to national level (through the MinJUS and the Ombudsman's Office).



PROMOTION OF PROCESSES
OF TERRITORIALISATION OF
POLICIES, PROGRAMMES AND
SERVICES IN VULNERABLE COMMUNITIES

To develop this line of work, we are able to count on the active participation of the Latin American Network of Organisations for Intervention in Situations of Social Suffering (RAISSS), a system of national networks that has been promoting the community treatment methodology in Latin America for decades. Its capillary structure and extensive presence in the region facilitate the ability to adapt to different contexts and provide close support to the countries participating in the programme.

From a **REGIONAL** perspective the following progress has been achieved:

- Training on the ECO2 Community Treatment model, aimed at both technical staff of public institutions and civil society, as a starting point for the development of territorialisation projects in the interested countries. A total of 107 people from 17 countries have been certified.
- We produced the "Guide to good practices and intervention models in Latin America and the Caribbean and the European Union for addressing drug-related social vulnerabilities" in collaboration with the RIOD (Ibero-American Network of NGOs working on Drugs and Addictions). This guide complements the resources directed to countries for the design and implementation of strategies at the territorial level.

At the **NATIONAL** level, the programme promotes 14 projects in 12 countries in the region:

BAHAMAS: The Bahamas National Drug Council is supported in promoting a territorialisation initiative in Abaco and in the community of Fox Hill (New Providence) to serve the



The improvement of drug care systems involves reinforcing the integration of rights, gender and social inclusion approaches as a way to promote comprehensive responses and facilitate access for women and vulnerable populations.

- Haitian migrant population, which is particularly vulnerable to drug consumption, micro-trafficking and human trafficking.
- BELIZE: Work is being done in the city of Dangriga with the National Council on Drug Abuse, the Ministry of Health, the Community Police and several humanitarian NGOs (the Red Cross and HelpAge, among others) to improve care for alcohol, drug and homelessness problems of the migrant population.
- JAMAICA: A project has been identified with the National Council against Drug Abuse in the community of Falmouth (Trelawny), affected by drug consumption and the proliferation of homeless people, to intervene with young drug users and prevent their ending up on the street.
- ➤ TRINIDAD & TOBAGO: Work is being done in Penal, in the south of the country, a community that registers high rates of migration of the Indian and Venezuelan populations, as well as drug consumption. With the Ministry of Health's Alcohol and Drug Abuse Prevention Programme, work is being done on the design of art and culture workshops.

- BRAZIL: The Municipality of Fortaleza is supported in promoting a violence and addiction prevention project aimed at vulnerable young people in two communities (Jangurussu and São Francisco).
- CHILE: The programme supports the National Service for the Prevention and Rehabilitation of Drug and Alcohol Consumption (SENDA) in designing a pilot project in Valparaíso, aimed at creating a specific department for community work in the territory, which can be coordinated with existing prevention and treatment programmes.
- COLOMBIA: Support for the development of the Strategic Vulnerability Reduction Plan and the community action policy of Colombia, which includes a guide to community mechanisms.
- lnstitute (ICD) is supported in designing and implementing two pilot territorialisation projects in the communities of Limón and Punta Arenas, aimed at vulnerable populations aged 13 to 18. The aim is to coordinate basic health services and employability, public security and human security.

- PERU: Support is provided to the National Commission for Development and Life Without Drugs (DEVIDA) in preparing a "Guide to the implementation and evaluation of the proposed Comprehensive Community Intervention for the Reduction of Drug Demand pilot scheme" in both Amazonian (Coronel Portillo, Pucallpa) and peri-urban (Lima) contexts.
- DOMINICAN REPUBLIC: The Bani women's prison is being supported in the initial phase of implementation of the Wings of Transformation Programme, aimed at women in prison.
- SURINAME: Within the framework of the country's National Rehabilitation Plan, an intervention guide is projected in the Hazard prison, in Nickerie, in order to coordinate the efforts of education, leisure and social security, with new initiatives in housing and more effective collaboration with the community resource network.
- URUGUAY: The National Drug Board has identified a pilot experiment in the daily care centre for women and homeless people in the community of Las Piedras (Canelones), within the framework of a programme entitled La Otra Esquina (meaning "The Other Corner").



INTERVIEWS

COPOLAD proposal regarding care and social integration of people with problematic drug use.

Jaime Urrego, Deputy Minister of Public Health of the Government of Colombia.

<u>Evalinda Barrón, Director of the Mexican National Commission against</u> Addictions (CONADIC).





PUBLICACIONES

<u>Guía de abordaje de las vulnerabilidades sociales ligadas a las drogas.</u>





MEETINGS

Seminar "Drugs, vulnerabilities and urban territories".

Meeting on quality care and social integration of people with problematic drug use.













