

Challenges for harm reduction: funding for the international scale up of services

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7 May 2012

The global need for services

- 16 million people who inject drugs worldwide
- 3 million people who inject drugs living with HIV
- High rates of HCV
- Coverage of services 'very low' in low and middle income countries
- Access to treatment (HIV/HCV) poor
- Increases in HIV amongst PWID in new settings: East Africa/West Africa
- Changing trends in HIV and development financing

Resource needs estimates (2011)

	2011	2015	2020
Basic programmes (total)	\$7.0	\$12.9	\$10.6
Prevention of mother-to-child transmission	\$0.9	\$1.5	\$1.3
Condom promotion	\$0.4	\$0.5	\$0.6
Sex work	\$0.2	\$0.2	\$0.2
Men who have sex with men	\$0.3	\$0.7	\$0.7
Injecting drug users	\$0.5	\$2.3	\$1.5
Treatment, care, and support (including provision of provider-initiated counselling and testing)	\$4.5	\$6.7	\$5.5
Male circumcision	\$0.1	\$0.2	\$0.1
Behaviour change programmes	\$0.2	\$0.7	\$0.7
Critical enablers	\$5.9	\$3.4	\$3.7
Synergies with development sectors	\$3.6	\$5.8	\$5.4
Total	\$16.6	\$22.0	\$19.8

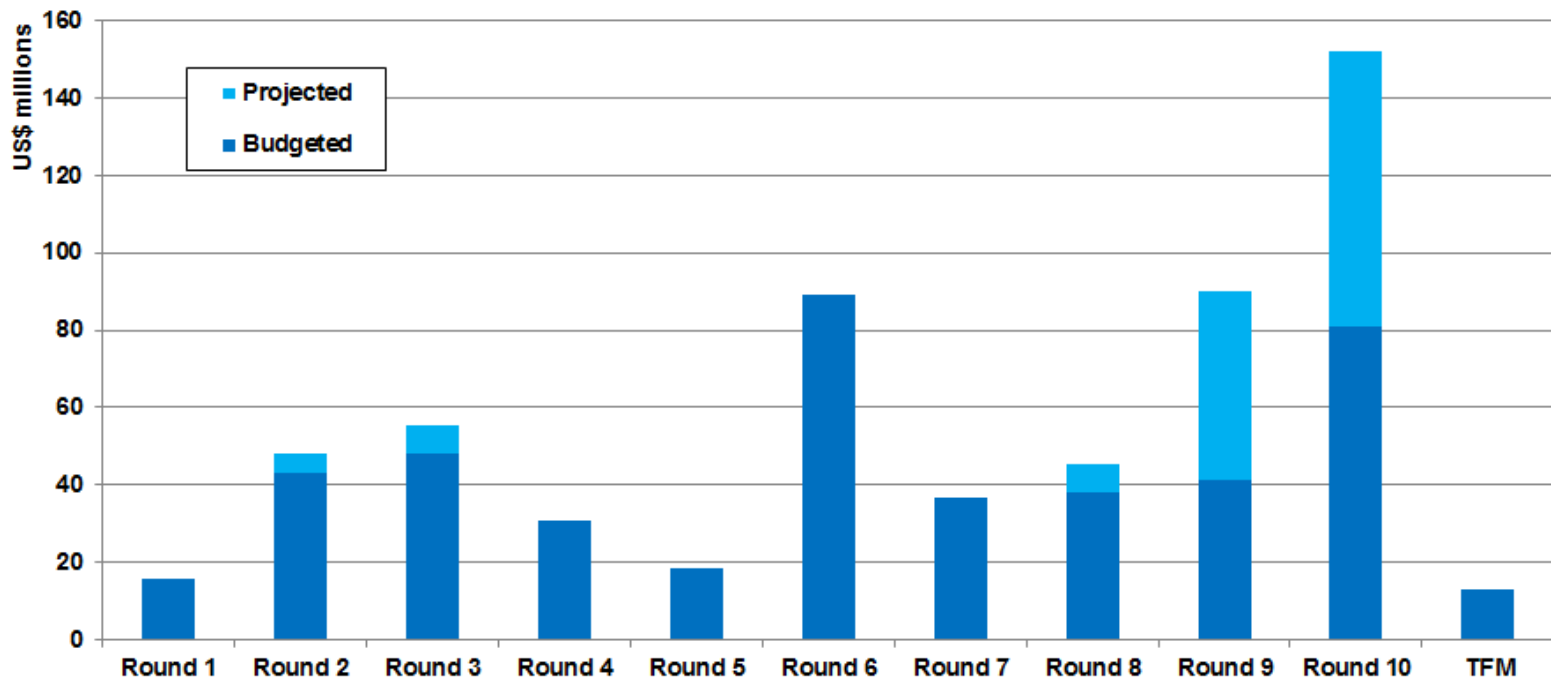
Table 2: Resources required for the investment framework over time (billions of US\$)

Source: Schwartländer et al. *Towards an improved investment approach for an effective response to HIV/AIDS. Lancet 2011; 377: 2031–41*

Global Fund for AIDS, TB & Malaria – funding harm reduction

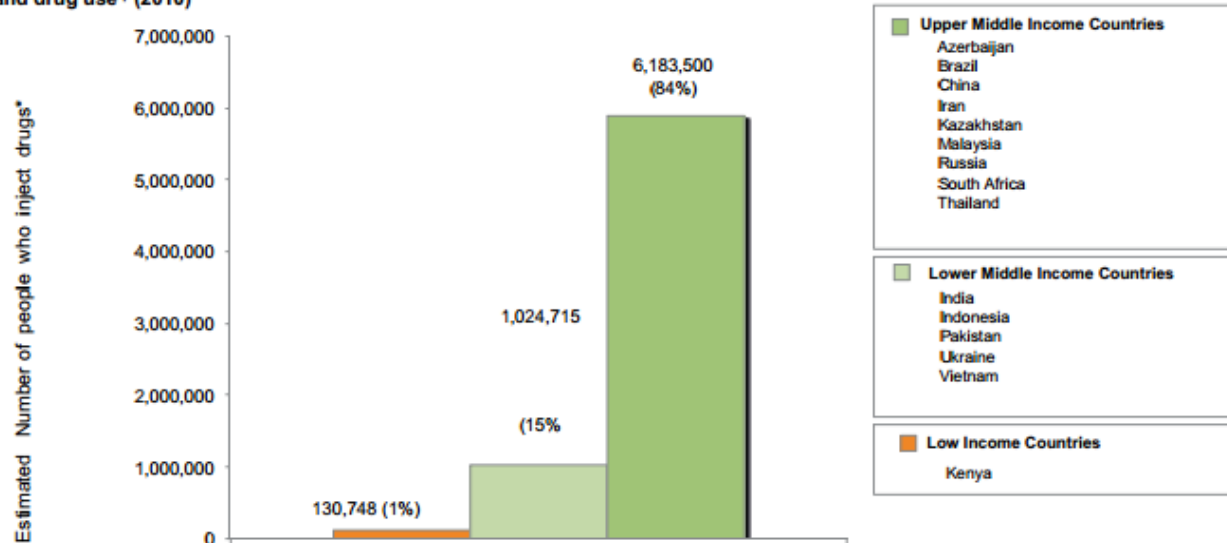
- An estimated **US\$ 595 million** has been committed for people who inject drugs since Round 1
- **147** grants in **58** countries (plus **1** multi-country grant in the Middle East and North Africa)
- Global Fund is the leading international donor for harm reduction
- Changes in Global Fund funding policy – *New Funding Model*

Global Fund investments in harm reduction



Middle income country status & injecting drug use

Figure 2: Estimated numbers of people who inject drugs, categorized by country income status, in the 15 priority countries for HIV and drug use[†] (2010)



[†] List of countries from UNAIDS (2010). 'Getting to Zero: 2011-2015 Strategy,' p.23.

^{*} Estimates of PWIDs: Mathers, B. et al. (2008) 'Global epidemiology of injecting drug use and HIV among people who inject drugs: a systematic review,' *The Lancet* 372(9651): 1733-1745.

Global Fund New Funding Model

- Ceilings for countries
- Eligible/ineligible
- Cutting investments in harm reduction programming (“over-allocated”)
- Global Fund country priorities following other development donor priorities – away from harm reduction
- 58 countries – 14 ineligible, 10 no new \$
- Estimated spend on harm reduction - \$64 million

- Domestic funding for harm reduction – policy barriers/emphasis on drug control responses

Advocacy agenda for scaling up access to harm reduction

- Tracking domestic investments in harm reduction
- Building capacity for civil society to advocate for domestic resources for harm reduction
- Keeping the Global Fund global
- European harm reduction responses to HIV amongst PWID – our best evidence