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### Facts about Drug Use and the Spread of HIV

#### HIV among Drug Users—Why Is It So Important?

Like drug use, HIV is a public health issue. Although the global response to HIV has made extensive progress over the past two decades, **HIV continues to spread rapidly among people who use illicit drugs** in various regions of the world.

- Today, up to 10 percent of global HIV infections are due to injecting drug use. If Sub-Saharan Africa is excluded, up to 30 percent of global HIV infections are due to injecting drug use.

  Source: UNAIDS (2008)
- Of an estimated 15.9 million people who inject drugs worldwide, up to 3 million are infected with HIV. The highest concentrations of HIV-positive injecting drug users are in Eastern Europe, East and South East Asia and Latin America. **Over 40 percent of injecting drug users are HIV positive in parts of these regions.**

Source: Mathers, B. et al. (2008)

Sharing needles and injection equipment is thought to be three times more likely to transmit HIV than sexual intercourse.

**Unsafe injecting drug use helps spread HIV in prison settings.** Many drug users are imprisoned instead of receiving treatment, and often they continue to inject while in detention, adopting riskier injecting practices in the absence of HIV prevention efforts. Drug users in prison settings are also at increased risk of contracting HIV through unprotected sex (including sexual violence), as well as body piercing and tattooing with non-sterile equipment.

Other types of illicit drugs are also associated with HIV transmission. The use of amphetamine-type stimulants by men who have sex with men has been associated with high levels of HIV infection in both high-income countries and other countries, particularly in South East Asia. Crack cocaine has been associated with the sexual transmission of HIV, especially in sex work and other forms of transactional sex, particularly in the Caribbean.

### How Drugs and HIV Policy Can Help Stop the Spread of HIV

Research shows that an HIV epidemic among injecting drug users can be prevented, halted and even reversed. Yet injecting drug users often have little or no access to HIV prevention and treatment services:

- Globally, only 2 needle syringes per injecting drug user are distributed per month.
- Only 8 percent of injecting drug users receive opioid substitution therapy.
- Only 4 percent of HIV-positive injecting drug users receive antiretroviral therapy.

Source: Mathers, B. et al. (2010)

Moreover, imprisonment for drug use rather than treatment can increase the spread of HIV rather than contain it.

Without drugs and HIV policy supporting evidence-informed programmes for HIV prevention and treatment, HIV can spread like wildfire among injecting drug users and prisoners. This also poses a serious risk of spreading HIV to the broader community and burdening healthcare and criminal justice systems, especially in low and middle-income countries.

**Drugs and HIV policy can change this**. Guaranteeing universal access to the full spectrum of HIV prevention, treatment, care and support services for injecting drug users and prisoners can help stop the spread of HIV, which benefits public health. Providing a comprehensive package of interventions for injecting drug users can also help them to lead healthier and more productive lives within their communities.





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## AIDS 2010: Rights Here, Right Now

#### 18th International AIDS Conference



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AIDS 2010 is the world's premier gathering devoted to HIV/AIDS. Convened by the International AIDS Society in partnership with UNODC and UNAIDS, the conference will draw global attention to the need for continued AIDS investments to broaden human rights, health and development goals, particularly among the most at-risk populations, including injecting drug users and prisoners. Some 25,000 scientists, policymakers, legislators, healthcare professionals, law enforcement and criminal justice professionals, civil society representatives and people living with HIV/AIDS will attend AIDS 2010 to review new scientific knowledge, take stock of progress and chart a way forward in the effort to end the global pandemic.

AIDS 2010 offers an excellent opportunity for policymakers and officials in public health, law enforcement and criminal justice to share lessons and exchange information on how drugs and HIV policy can help contain and stop the spread of HIV. AIDS 2010 will include sessions on drug-related topics such as: setting targets for universal access to HIV services for injecting drug users; HIV needs assessments in prison settings; and HIV prevention among female injecting drug users. It will also offer extensive networking opportunities.

The AIDS 2010 theme, *Rights Here, Right Now*, underscores the need for concrete human rights measures to protect those most vulnerable to and most affected by HIV—including women and girls, people who use drugs, prisoners, sex workers, migrants, men who have sex with men, and transgender persons. Vienna was chosen as the conference site in part for its proximity to Eastern Europe, the Baltic States and Central Asia, where HIV is spreading rapidly, largely through injecting drug use.

# UNODC: Reducing the Spread of HIV among Injecting Drug Users, Prisoners and Other Vulnerable Populations

UNODC is the lead agency within UNAIDS for HIV prevention, treatment, care and support for injecting drug users and in prison settings. UNODC also has a special mandate to facilitate the development of a United Nations response to HIV for people vulnerable to human trafficking. Together with other members of the UNAIDS family, UNODC is working to achieve universal access to the full spectrum of HIV services for these vulnerable populations.

With over 100 staff based at the country level, UNODC works on HIV in 55 priority countries in Africa, Eastern Europe and Central Asia, South and South East Asia, Latin America and the Caribbean. **UNODC helps countries provide drug users, prisoners and people vulnerable to human trafficking with comprehensive, evidence-informed HIV services.** We do this through:

- Advocacy campaigns to reduce stigmatization and discrimination and promote adherence to human rights;
- Support for developing effective legislation and policies;
- Support for developing comprehensive, evidence-based strategies and programmes; and
- Building the capacity of national partners—including government agencies, civil society and community organizations—to ensure that these most at-risk groups receive optimum HIV services.