Services for Drug users: TB/HIV scale up
Group 3
TB/HIV activities in the WHO European Region
16-17 July 2010
Participants:

- Armenia
- Azerbaijan
- Belorussia
- Georgia
- Kyrgyzstan
- Latvia
- Moldova
- Russia
- Tajikistan
Barriers

• Access to HIV and TB testing for IDUs (financial, geographic)
• Quality of HIV/TB testing (lack of consultation)
• Lack of right to provide HIV testing for IDUs by NGOs
• Legislation, Stigma and discrimination
• Absence of (or insufficient) OST
• Lack of integration between the different Government agencies & collaboration between TB, HIV and narc. programs.
• Absence of knowledge and guidelines, experience of working with IDU’s and people who use amphetamines by HIV & TB services.
• Surveillance for the risk groups
• Limit number of NGOs
• Sustainability
• Inadequate narcological treatment for IDUs and absence of overdose prevention measures
• Lack of follow up of HIV/TB treatment for IDU’s after discharge from the prisons
Critical political changes on the national level

- Harmonization of the legislation on national level based on the international requests (convention on drug control)
- Developing and adoption guidelines (OST) based on international standards
- Capacity building related TB/HIV/harm reduction programs for Stakeholders
- Strengthening advocacy of the International organizations on political level
- Strengthening the role of CCM
# Activities and steps

| Harm reduction programmes provide services for TB/HIV case detection (one stop shop) | Adoption of national policy  
|                                                                                   | Improvement of normative base |
| Progress to client centered approach with medical/social services | Review and evaluation of service implementation  
|                                                                                   | Develop recommendations for service provision and change practices |
| Increase of awareness among general population, target groups and service providers | Mass media  
|                                                                                   | Peer educations  
|                                                                                   | Trainings |
| Treatment as prevention. Access to HAART, IPT for IDU’s. | Strengthen procurement of drugs by the state.  
|                                                                                   | Develop and approve national protocols for treatment of HIV and TB prevention for IDU’s based on international standards. |
| HIV/TB testing for people who use drugs | All HIV patients tested for TB  
|                                                                                   | All TB patients tested for HIV |
| Improvement of conditions for prisoners and infection control and decrease number of convicts. | Regulation ensuring sufficient budget for prisons.  
Harm reduction  
Integration between civil and penitentiary system and civil society.  
Training of prison health staff in early case detection |