

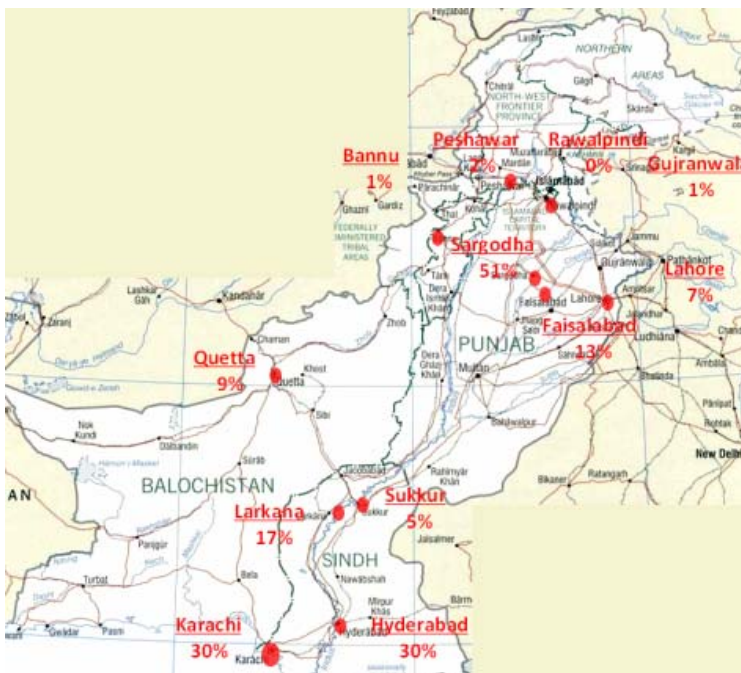
Pakistan Country Advocacy Brief Injecting Drug Use and HIV

Key actions to be supported

- Prioritization of expansion of HIV prevention, treatment and care services fast enough and at a sufficient scale to reach a much larger proportion of people who inject drugs, including in prisons, than is currently being reached
- Swift introduction of the opioid substitution pilot with methadone and advocacy for inclusion of methadone and buprenorphine on the national list of essential medicines
- National consensus building on the size estimate of injecting drug users and definition of coverage would facilitate programme planning, monitoring intervention coverage and, ultimately, programme impact
- Sensitisation of law enforcement officials, at all levels, on harm reduction and their role in referral of drug users to harm reduction services
- Resource mobilisation to secure additional, and sustained funding, for prevention interventions for IDUs to ensure an increase in the level of intervention coverage.

- The primary drug of use among persons treated for drug problems in Pakistan is opiates. There were approximately 630,000 opiate users in Pakistan, equivalent to 0.7% of the population age 15-64 according to the 2006 National Assessment Report on Problem Drug Use in Pakistan.¹ Of these, approximately 480,000 (77%) were heroin users.²

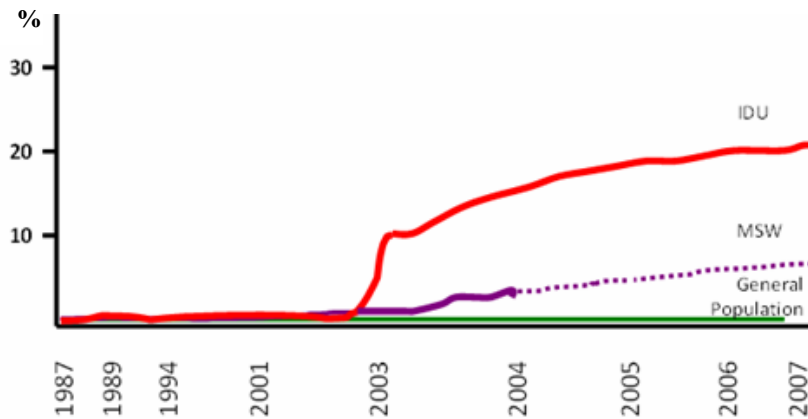
Figure 1. HIV prevalence among IDU in select cities



- The Second Generation Surveillance round in 2008 indicated, while injecting behaviors have become safer in cities with interventions for this population, the HIV prevalence among IDUs is yet to stabilize in these cities.³ For example, thanks to positive changes in knowledge, practices and behaviour, HIV prevalence has declined in Faisalabad and Sargodha.⁴

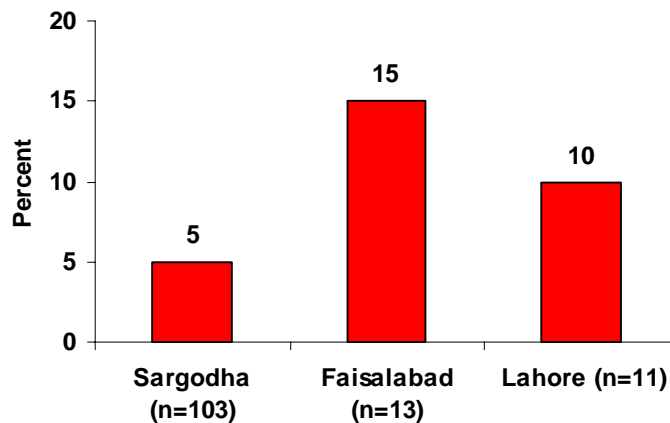
- The first major outbreak of HIV among injecting drug users was reported in 2003, when 10% of the 175 IDU tested for HIV were found to be positive in Larkana and Sindh province. Following this outbreak three rounds of integrated biological and behavioural surveillance (IBBS) in 2005-2008 have found rising prevalence of HIV in this population as seen in below graph.⁵

Figure 2. Increasing HIV prevalence among people who inject drugs⁶



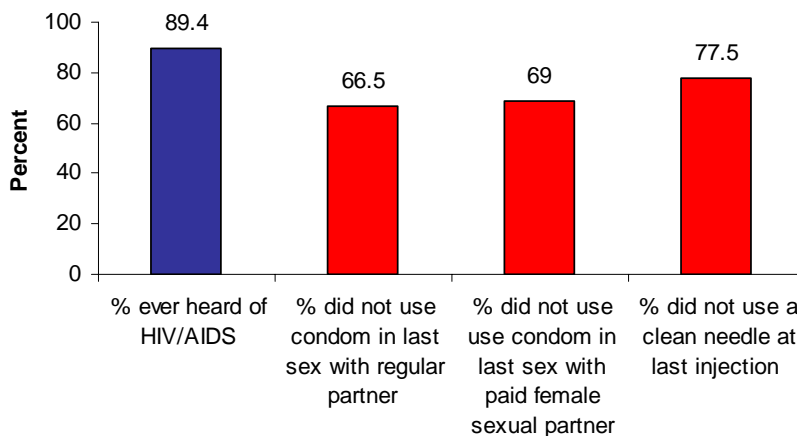
- A survey in 2008 also unearthed a “hidden epidemic” of HIV among the wives of IDUs, none of whom reporting injecting drug use. HIV prevalence among the wives ranged from 5% in Sargodha to 15 % in Faisalabad, respectively.⁷

Figure 3. HIV prevalence among a sample of wives of men who inject drugs⁸



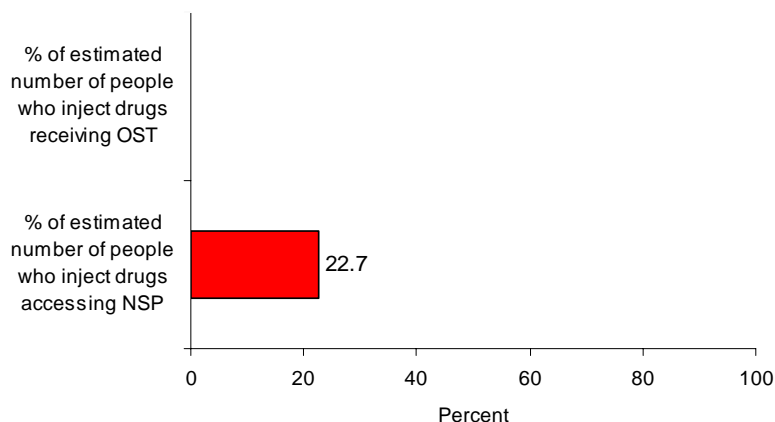
- The study also found low level of condom use, with over 70% of wives reporting that no condom was used in last sex with husband.
- Data on HIV knowledge and behaviours indicated low level of comprehensive knowledge on HIV, low level of condom use and use of sterile injecting equipment (Figure 3.) Only 4% of injecting drug users have ever had an HIV test and know the result.⁹

Figure 4. HIV risk and vulnerability among injecting drug users¹⁰



- Overlap between injecting drug use and sex work is also of significant concern in Pakistan.¹¹ This overlap, coupled with HIV prevalence of HIV among injecting drug users, reported high risk behaviours and low HIV knowledge, indicate a potential for a rapid spread of HIV in Pakistan. Data from a mapping exercise found that 27% of men who inject drugs reported visits to sex workers in the previous six months and of these 21% had used a condom.¹²
- Other populations considered at high risk include male and female sex workers, transgenders, jail inmates and long distance truck drivers.¹³
- The National HIV and AIDS Strategic Framework (2007-2011) identifies prevention of drug related HIV transmission through needle and syringe exchange and referrals to drug treatment services, based on detoxification, as priority areas. Of the national HIV budget, 60.7%, or USD 3.6 million, has been allocated for prevention of HIV indicating strategic allocation of financial resources in a concentrated epidemic.
- The government is the main provider of HIV prevention services, with funding support predominantly from the World Bank, while projects are implemented by NGOs and the private sector.¹⁴ In the 2008-2013 funding cycle the government plans to more than double the funding to reach all most-at-risk populations in the country following of the “PC-I” project by the government.
- Harm reduction service delivery is considered as one of the success stories of the national HIV response. Harm reduction services, including NSP and outreach, were initiated with support from the Programme Accelerations Funds (PAF) and subsequently continued in 2002-03 in seven cities with DFID support. The services are delivered by various NGOs in all four provinces including Nai Zindaqi in Punjab, Pakistan Society, Alnijat and Merry Adalite in Sindh mainly Karachi, Dost Foundation in Peshawar, North West Frontier Province and Legend Society in Quetta, Baluchistan.

Figure 5. Coverage of people who inject drugs with OST and NSP programmes¹⁵



- To reach prisoners, *The Jail Inmates* NGO programme provides counseling, voluntary counseling and testing and peer outreach within the prison and social and medical services to some 2,300 clients in Peshawar and 1,500 in Haripur.¹⁶ UNODC, in collaboration with the provincial prison authorities, is implementing HIV Prevention programme in seven prisons, three of which are exclusively female prisons. Under the enhanced programme, jail interventions are also in place in Sindh province, in particular in large male and female jails in Karachi. These jail interventions are considered to be as best practice in the country.
- Overall, some 16% of injecting drug users has been reached with prevention programmes, including NSP, condom distribution and information about HIV testing, according to the UNGASS Country Progress Report in 2008.¹⁷ In 2008 a study by the World Bank reported that coverage of IDUs in cities where interventions exist ranges from 66-75%, increasing to 90% in Punjab.¹⁸
- Piloting of OST with methadone/Buprenorphine, has not been approved by the government yet. The plan is for the National/Provincial AIDS Control Programs, Anti Narcotics Force, Ministry of Narcotics Control and the UNODC to establish a pilot OST programme.
- Though coverage of the available harm reduction services is not high, behavioural and biologic data have indicated an increase in HIV knowledge and risk perception, increase in condom use and a decrease in sharing of needles and syringes among injecting drug users in cities where interventions exist compared with cities where no interventions are available.
- Though progress has been made in expanding reach of the NSP service, it is critical to reach a much larger proportion of injecting drug users with essential HIV prevention, treatment and care services in Pakistan to avert new infections among and from people who inject drugs from spilling into the general population.

ANNEX

Socio demographics and disease prevalence

		Date	Source
Total population (millions)	180.8	2009	UNFPA, 2009 ¹⁹
Estimated number of people living with HIV	96,000	2007	UNAIDS, 2008 ²⁰
Estimated population of people who inject drugs	91,112	2009	National AIDS Control Programme, 2009 Mathers et al., 2008 ²¹ UNODC, 2007 ²²
	130,460	2007	
	147,000	2007	
Prevalence of injecting drug use among 15-64 year olds	0.14	2007	The Reference Group to the UN on HIV and IDU, 2008
% female among people who inject drugs (n=2,979)	0.2	2008	National AIDS Control programme, 2008 ²³
% of men who inject drugs who have bought sex	17.7	2008	Ibid
% of men who inject drugs who had sex with a male sex worker (MSW) or a Hijra sex worker (HSW) in the past 6 months (n=2,979)	13.9	2008	Ibid
% of men who inject drugs who sold or exchanged sex for drugs (last six months)	16.8	2008	Ibid
% of men who have sex with men (MSM) who inject drugs			
Age of people who inject drugs (sample size= 715)			
Up to 24 years	16.7%	2008	Ibid.
25-29 years	22.6%		
30-34 years	16.9%		
35-40 years	25.3%		
> 40	18.5%		
Education level of people who inject drugs (n=2,979)	App 60% with no formal schooling	2008	National AIDS Control programme, 2008 ²⁴
% employed of people who inject drugs	70%	2008	UNODC, 2009 ²⁵
Marital status of people who inject drugs (n=2,979)			
Married	41%	2008	National AIDS Control Programme, Ministry of Health, 2007
Reported HIV cases			
Cumulative reported HIV infections among people who inject drugs			
% of AIDS cases associated with injecting drug use			
% people who inject drugs who are HIV positive	21	2008	National AIDS Control Programme
Estimated number of people who inject drugs living with HIV	11,240	2008	National AIDS Control Programme
% of prisoners who are HIV positive			
Adult HCV prevalence among people who inject drugs (%)	89.0		IHRA, 2008
TB & HIV co-infection among people who inject drugs			
Active Syphilis among people who inject drugs			

Intervention coverage

		Date	Source
Number of opioid substitution therapy (OST) sites	0	2009	
Number of people who inject drugs accessing OST	0	2009	
Number of prisoners accessing OST	0	2009	
% in need of OST accessing services (assuming 30% of IDU in need of OST)	0	2009	
Number of substitution treatment sites per 1,000 IDU	0	2009	
Number of needle and syringe programme sites	9	2008	Nai Zindaqi, personal communication, November 2008
Number of people who inject drugs accessing NSP through the service delivery programme (SDP)	20,640	2008	National AIDS Control Programme, 2009
% of people who inject drugs in need of NSP accessing NSP	22.7	2008	
Number of NSP sites per 1,000 IDU	0.1	2008	
Number of people who inject drugs received peer education / outreach			
% of people who inject drugs reached with peer education / outreach			

Number of drop-in centres	9	2006	Centre for Harm Reduction, 2006
Number of people who inject drugs accessed drop-in centres			
% of people who inject drugs accessed drop-in centres			
% of people who inject drugs who have received HIV testing and counseling in the last 12 months and know their result	< 25 yr olds: 4.6% > 25 yr olds: 4.1%		UNGAS Pakistan Country Report, 2008
Reported number of people receiving ART	907	Dec 2008	WHO, UNAIDS, UNICEF, 2009 ²⁶
Number of people who inject drugs in need of ARV			
Number of people who inject drugs on ARV			
% of people injecting drugs in need of ARV receiving ARV			
People who inject drugs on ARVs as a proportion of all PLHIV receiving ARVs			
% reached with prevention programmes	< 25 yr olds:15.1% > 25 yr olds:15.8%		UNGASS Pakistan Country Report, 2008
Estimated prison population	89,370	2005	Walmsley, 2007 ²⁷
Prisoners accessing services:			
Needle and syringe programmes	Not available		
Opioid substitution treatment	Not available		
HIV testing and counseling	Yes		
Antiretroviral therapy	Yes, 31 prisoners with HIV		
Prevention and treatment of STIs	Yes		
Condom programmes	Yes		
Targeted IEC	Yes		
Primary health care (including treatment of tuberculosis)	Yes		
Diagnosis, treatment and vaccination for viral hepatitis			
Prevention, diagnosis and treatment of tuberculosis			
Peer education programmes	Yes		
Post-release follow-up			UN RTF, 2010 ²⁸
Coverage of people who use drugs living in closed settings reached with one or more <i>services</i>			

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Disclaimer

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- ¹⁴ Adnan A. Khan for the World Bank. Effectiveness and Coverage of HIV Interventions in Pakistan: Insights from Triangulation of Program, Field and Surveillance Data. 2008.
- ¹⁵ Estimated coverage of IDU with NSP is calculated based on the reported number of IDU reached with NSP (n=20,640) through the service delivery programme (SDP) in the country out of the estimated number of IDU in the country (n=91,112).
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