
Preface

Halting the HIV/AIDS epidemic fuelled by substance abuse calls for a three-pronged strategy. First, it requires drug abuse prevention, especially among young people. Second, it requires effective outreach to engage drug users in HIV preventive strategies that protect both them and their partners from exposure to the virus. Finally, it requires the provision of access to drug abuse treatment.

Interventions to reduce risk behaviour among injecting drug users are critical. However, it is not only dependent drug use or injecting drug use that exposes the user to the risk of HIV/AIDS. There is now sufficient evidence that a state of intoxication in both the early use and the harmful use of substances, including alcohol, exposes the user to increased sexual risk-taking. An intervention model is therefore needed to address concerns both at all levels of use and for all drugs of abuse.

Peer-led interventions using peer-education for effective outreach offer a useful way to engage young people and bridge the gap between drug users and service providers. Outreach alone often does little beyond giving information and materials. A risk-reduction methodology is needed for guiding young substance users to practice and sustain health-seeking behaviour. Research indicates that peer-interventions work best when delivered as part of a larger basket of services. It is also recognized that outreach and peer-educator approaches complement each other well.

This publication is a work in progress and is not intended to be the definitive word on peer-led interventions for reducing risk-behaviour among young drug users in South Asia. However, the preliminary findings from field trials of this peer-led intervention methodology have produced encouraging results in reducing the risk-behaviour related to HIV/AIDS among young drug users in four countries of South Asia. UNODC will continue to test and improve the methodology contained in this document in an effort to help Governments and civil society in the region avert the threat posed by drug-driven HIV.



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