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POSITIVE PRACTICE SERIES

Addressing the needs of female injecting drug users: positive practice in the field

**A case study of Wuzhou City
Guangxi, People's Republic of China**

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For more information about the Australian Government's international development program, contact:

Communications Section
AusAID
GPO Box 887
Canberra ACT 2601
Australia

Phone +61 2 6206 4000
Facsimile +61 2 6206 4880
Internet www.ausaid.gov.au

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www.iniscommunication.com

Acknowledgements

The HIV/AIDS Asia Regional Program (HAARP) recognises that female drug users, intimate partners of substance users, men who have sex with men, transgender populations and sex workers who also use drugs, are much more vulnerable to HIV infection than the general population. HAARP is therefore deeply committed to delivering harm reduction programs that are gender sensitive. As part of this effort, the Technical Support Unit (TSU) develops tools and materials that help country programs to understand how gender issues affect their own country context. Via the TSU, country programs have examples of positive practice in other countries that may be applied to their own. This document focuses on women who are injecting drug users and attempts to reveal factors that increase their utilisation of harm reduction services.

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Abbreviations

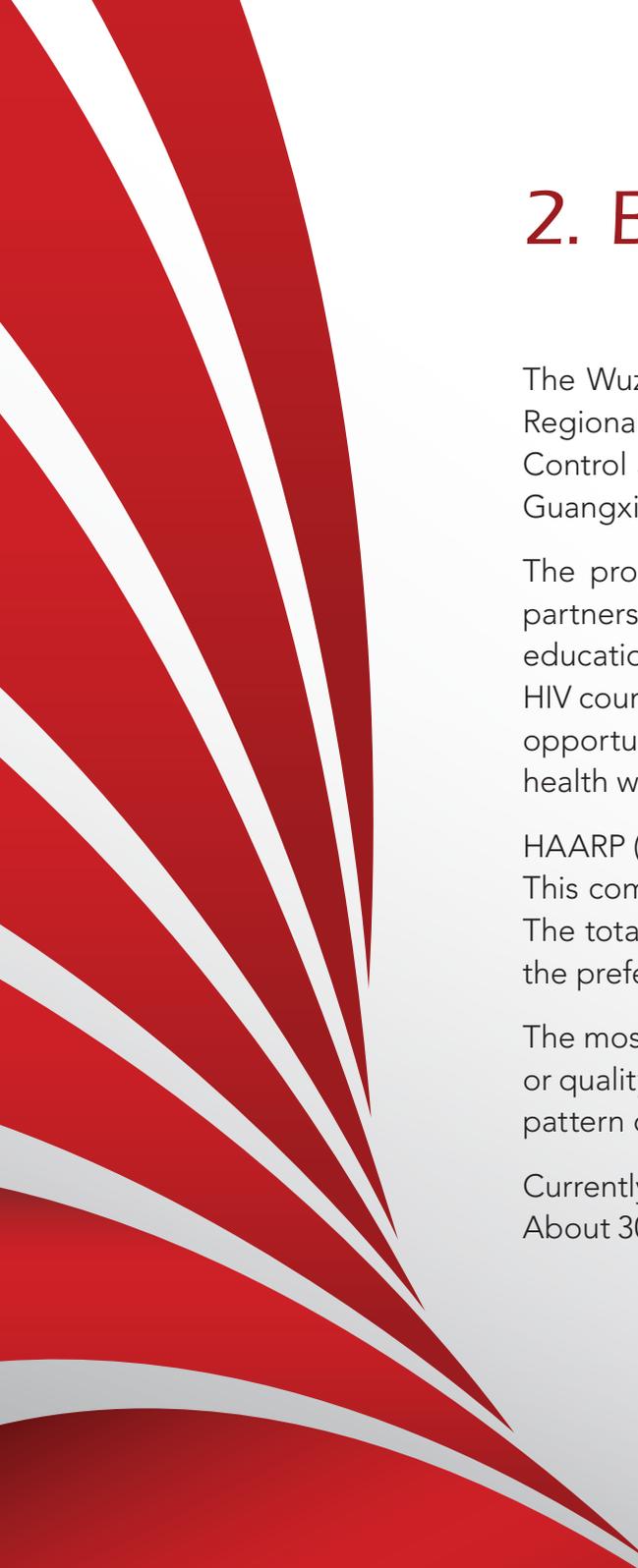
AIDS	acquired immune deficiency syndrome
DIC	drop-in centre
HAARP	HIV/AIDS Asia Regional Program
HIV	human immunodeficiency virus
IDU	injecting drug user
IEC	information, education and communication
MMT	methadone maintenance therapy
NSP	needle and syringe program
ORW	outreach worker

1. Introduction

This case study was developed as a component of a research project commissioned by the Technical Support Unit of the HIV/AIDS Asia Regional Program (HAARP) on the status of gender-responsive programming for HIV prevention and substance use. In Wuzhou, HAARP has achieved relatively high rates of contact with and service delivery to women who are injecting drug users (IDUs). Currently, female IDUs are 27% of all clients reached through the HAARP-funded program in Wuzhou, translating into more than 100 women each month.

The purpose of the case study is to investigate and improve understanding of what has enabled Wuzhou to achieve these results.

The research that informed this case study used focus group discussions and individual interviews with female IDU clients, male and female outreach workers (ORWs), who function as peer educators, and staff and management. These face-to-face discussions were combined with desk research of reports that relate directly to the Wuzhou program.



2. Background

The Wuzhou HAARP Effective Approach Project is a mature site that was first established under the Asia Regional HIV/AIDS Project (ARHP) in 2004. The program is implemented by Guangxi Centre for Disease Control and Prevention and the Chinese Ministry of Health, and is one of the 12 sites currently operating in Guangxi Zhuang Autonomous Region. Wuzhou Prefecture has a population of 3.1 million.

The program provides a comprehensive package of harm reduction services for IDUs and their sexual partners, including needle and syringe programs (NSPs); condom distribution; the provision of information, education and communication (IEC) materials; and referrals and access to antiretroviral treatment, voluntary HIV counselling and testing, methadone maintenance therapy (MMT), sexual health services, the treatment of opportunistic infections, and care and support. The program also works to strengthen the capacity of both health workers and the police to implement and support harm reduction.

HAARP (Wuzhou) provides services to 340–380 registered IDU clients each month, 27% of whom are women. This compares with the provincial program average for female IDUs of 18% in Guangxi and 20% in Yunnan. The total coverage of all NSPs operating in Wuzhou is 1225 clients, or 41% of the estimated total of IDUs in the prefecture.

The most commonly used drugs for injection in Wuzhou are heroin and, depending on availability, cost and/or quality, heroin combined with diazepam. According to program staff and the female IDUs interviewed, this pattern does not vary between men and women.

Currently, there are two MMT clinics operating in Wuzhou, with plans to establish a third in the near future. About 300 people are enrolled in the program, including 30 women. No data were available on the quotas or

goals for recruiting men and women to the program. Although HAARP does not provide MMT in China, it actively refers clients to MMT services and supports their retention in treatment. The vast majority of HAARP ORWs in China are also clients of MMT services.

Table 1 Summary of disaggregated site-level data from Wuzhou

	Total	Male (%)	Female (%)
Drug users/IDUs registered by Public Security ^a	1488	87.3	12.7
Estimated number of IDUs in Wuzhou	3000	N/A	N/A
Cumulative cases of HIV recorded in Wuzhou, 2009 ^b	816	N/A	N/A
HIV infections through injecting drug use	56%	N/A	N/A
HIV prevalence among IDUs ^c	43%	^d	
Estimated number of new cases of HIV reported in 2009	81	70.38	29.62
Hepatitis C prevalence among IDUs	81%	^e	
Estimated number of IDUs accessing HAARP NSP services each month	350	73	27
Estimated number of people enrolled in the MMT program in Wuzhou	300	90	10
Estimated number of sex workers active in Wuzhou	1150 ^f	^g	100

a Data provided by the Wuzhou centre for disease control and prevention.

b Data sourced from Mission Report: HAARP joint annual work planning and review. China Country Program. 15–24 March 2010.

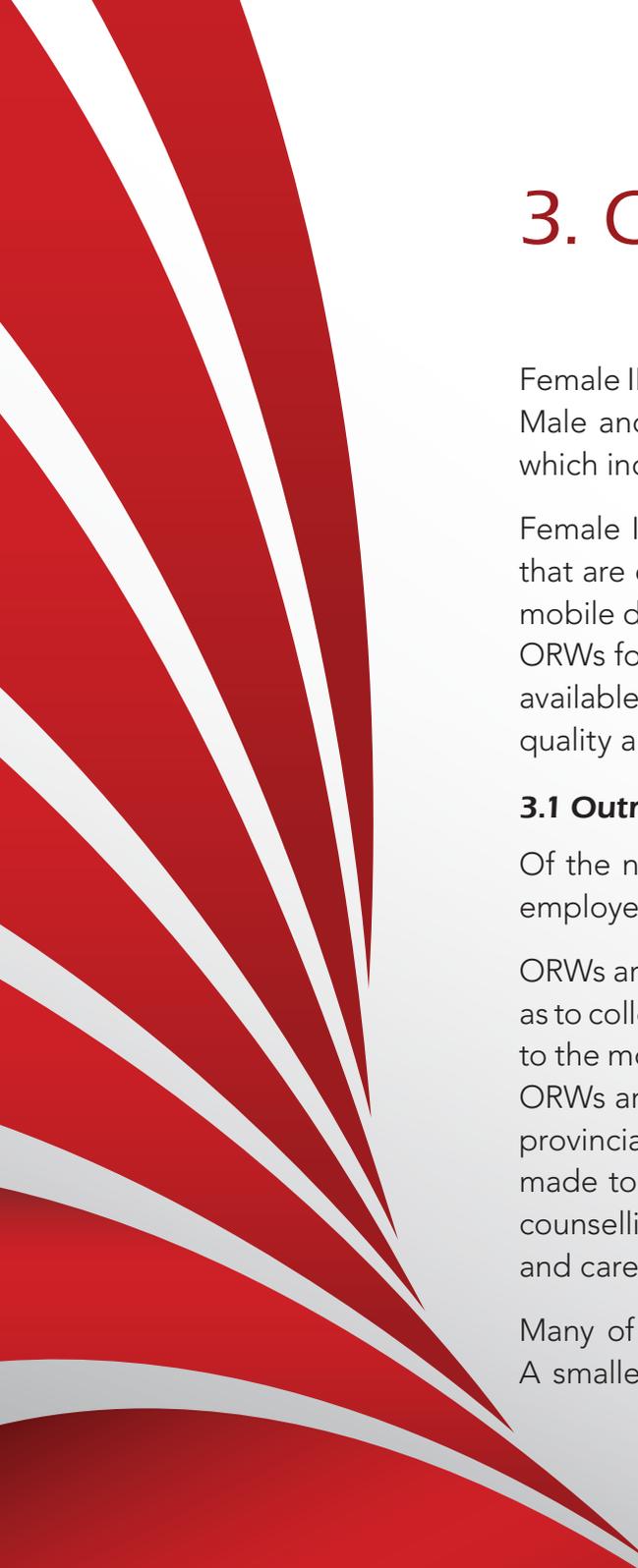
c Data from direct network report: the number of positive IDUs and provided by the Wuzhou centre for disease control and prevention.

d 85% of HIV-positive IDUs are male.

e 83% of IDUs with hepatitis C are male.

f Data relate exclusively to female sex workers.

g Data on male sex workers were not sourced.



3. Observations on the overall program

Female IDUs in Wuzhou are offered harm reduction services through fixed-site and mobile distribution points. Male and female ORWs serve as mobile distributors, augmenting drop-in centres (DICs) and back offices, which include back offices operated by local community committee members.

Female IDUs are also offered referral services, IEC materials and, on occasion, health information sessions that are often delivered in DICs. Overwhelmingly, the female clients interviewed expressed a preference for mobile distribution through ORWs because of the discreet nature of this service, convenience of phoning the ORWs for clean equipment, and flexible hours in which this service is offered. Needles and syringes are also available through pharmacies and some health clinics, but all the female IDUs interviewed prefer both the quality and easy access of HAARP services.

3.1 Outreach workers and peer educators

Of the nine ORWs employed by HAARP in Wuzhou, three are female. One of the three females has been employed by the program since 2004, and another since 2006. All three women are on MMT.

ORWs are employed to deliver sterile syringes and needles, cotton swabs, sterile water, and condoms, as well as to collect used equipment from clients. Most of the outreach work responds to demand placed through calls to the mobile phones of ORWs and are provided at the homes of clients or at other predetermined locations. ORWs are available during and beyond standard business hours. IEC materials have been developed by the provincial AIDS program and provide information on safe injecting practices and sexual health. Referrals are made to services for antiretroviral treatment, preventing mother-to-child transmission of HIV, voluntary HIV counselling and testing, MMT, sexual health services, treating opportunistic infections, hepatitis C testing, and care and support. ORWs each serve 35–40 clients per week and are paid 450 yuan per month.

Many of the female IDUs interviewed preferred to source clean injecting equipment from female ORWs. A smaller but notable proportion of women expressed a preference for regular contact with a particular

male ORW. No explanation was provided for this beyond personal preference and having established a rapport with an individual ORW over time. Program data show that the male and female ORWs have an equal spread of male and female clients among them.

Initial contact with female clients is often through word of mouth and/or referral by a friend. Discussions with female ORWs and female IDUs suggest that there is a closely connected community of female IDUs in Wuzhou and that they are actively encouraged to refer other drug users to NSP services. The Wuzhou AIDS program reaches a higher proportion of officially registered female IDUs than registered male IDUs, perhaps reaching a vast majority of all registered female IDUs.

While the program has been successful in reaching both registered and unregistered female IDUs in Wuzhou, official aggregated data suggest that a community of hidden, unregistered, and yet-to-be-reached male and female IDUs persists in Wuzhou. If this is the case, little is known about these people; their economic status or whether they are younger or older IDUs, from rural areas, or engaged in sex work.

3.2 Drop-in centres

Of the three DICs operating in Wuzhou, one is funded by HAARP. DICs support outreach operations and function as venues for training, program administration and group discussions. While DICs may stock clean injecting equipment, they are not considered user-friendly for NSP services from a client's perspective, given the punitive law enforcement environment for drug offenses. Regular

attendance at the DIC is perceived as a risk for both male and female IDU clients, who wish to keep a low profile and avoid being identified as drug users, which could bring incarceration in a detoxification centre or labour camp.

The sites have a meeting room or space and are available for information sessions and training. The HAARP DIC is above a MMT and HIV testing clinic. On occasion, female IDU clients meet at the DIC, but it is more commonly used as a meeting point for both men and women. The DIC offers the same facilities and services to men and women. Interviews with female IDU clients included discussion of the benefits of attending more women-only meetings and information sessions than are currently provided.



A health education session is conducted with female IDU clients in Wuzhou.

A number of female clients acknowledged that such sessions enable them to learn more about issues regarding women's health. The sessions also provide opportunities for them to come together for mutual emotional support and reduce some of the isolation that they experience as IDUs. Female clients did not express any need for other gender-responsive changes, such as a designated female-only space, alternative access points or child-friendly spaces. This may be attributed to the limited use of DICs by IDU clients in general.

3.3 Back office and advocacy: partnerships with community committees

HAARP in Wuzhou collaborates with the Shigu and Wufang communities of Wanxiu District through a formal partnership with their community committees.¹ With financial assistance and support from HAARP, the Shigu community committee operates a back office that stocks and distributes needles, syringes, cotton wool, sterile water and IEC materials.

The site functions as an equipment pick-up and drop-off point for ORWs/peer educators and is visited by a few male and female clients. According to the community director of Shigu, the outlet receives about 10 male and female IDU clients each week, who collect and exchange injecting equipment. Meetings are often arranged by phone.

¹ Community committees exist mostly in urban areas throughout China and are administered by sub-district, the smallest political division in the country. Community committees operate within defined boundaries and with designated leaders to assist with such tasks as census taking and other community work.

The site is managed and manned, by rotation, by the female community director and/or individual committee members, who receive 270 yuan rent for the premises and 450 yuan in remuneration for their services each month. The Wufang community committee delivered NSPs until early 2010, but this work has since been transferred to the Shigu community committee, which has been actively involved with the AIDS program, Asia Regional HIV/AIDS Project and HAARP, since its inception in 2004.

Through the community committees of Wufang and Shigu, and with their support, HAARP conducts informal advocacy and sensitisation with the broader community and Public Security officials about the rationale behind harm reduction and its benefits. According to respondents, including the Shigu community director, the HAARP-funded NSP is now able to operate with strong support from the Shigu community. The outlet also enjoys strong support from local public authorities.

The committee itself is a representative body of the local community, including local business owners, and this familiarity assists them in their work within the community.

4. Key elements of success of the Wuzhou program

4.1 Establishing and maintaining relationships with female IDU clients through outreach workers/peer educators

Using the peer-to-peer model, the Wuzhou team has recruited and supported female and male former IDUs to deliver outreach services and support to IDU clients, providing benefits for both the individuals and the program. Female former IDUs have been active in the program since 2004, and it is believed that gender balance among ORWs in the program contributes significantly to the number of female IDUs reached. The even spread of male and female clients among ORWs suggests that having female ORWs is valued by both male and female IDU clients.

4.2 Establishing and maintaining relationships between management and female ORWs

The female director of the program described the challenges of supporting and building the capacity, over time, of ORWs, particularly females. Some of these challenges reflect the lifestyle of ORWs, which is often a transition from a life characterised by illicit drug use and dependence to one focused on managing drug dependence. HAARP in Wuzhou recognises the support required and challenges faced by former IDUs, particularly during the initial period, in committing to such things as time sheets, regular hours of work and staff meetings. Particularly during their initial involvement with the program, the director and female ORWs maintain direct contact with each other so that the program can be aware of and address the concerns and challenges faced by female ORWs as they arise.

Table 2 Number of female ORWs employed in Wuzhou compared with other HAARP sites in China

Site	Wuzhou, Guangxi	Guiping, Guangxi	Yanshan County, Yunnan	Pingyuan Township, Yunnan, Yanshan sub-site	Mengzi, Yunnan
Outreach workers (number)	9 (3 female)	9 (all male)	7 (all male)	3 (all male)	5 (1 female)

Note: Data are sourced from Mission Report: HAARP joint annual work planning and review. China country program, 15–24 March 2010.

The Wuzhou program recognises and values the contribution that both male and female ORWs make to the program, and this is reflected in the numbers of female IDU clients using NSP services. The program also recognises the benefits that this contribution offers the female ORWs in terms of building self-esteem and supporting their transition away from illicit drug use.

4.3 Partnership with community committees

Partnership with community committees is central to the approach of HAARP in Wuzhou. Through the support and engagement of the two committees, the program has been able to undertake sensitisation work with the community and local authorities, which has brought greater understanding of and support for their work. The program has been able to establish more central—and therefore more accessible—collection and distribution points for ORWs and clients. The community committee model is believed to facilitate access to female IDUs through direct contact with them and support for ORWs working directly with them.

4.4 Adopting flexible working hours

Offering the NSP during and beyond standard business hours means that services are tailored around the needs and lifestyles of female IDUs instead of the other way round. Many of the female IDUs interviewed have work and/or family commitments that may restrict their movements during particular times of the day. Moreover, some women reported living with families who were unaware of their ongoing drug use. These factors, combined with the often opportunistic behaviour around drug sourcing and use, highlight the need for and benefits of more flexible operating hours. Offering flexible hours of operation combined with mobile distribution enables more client contact and delivery of outreach services, as well as helping to address concerns about security and possible arrest. The potential limitations of this approach are that ORWs are on call day and night, though the present ORWs seem unconcerned about this.

4.5 Building and maintaining relationships with the authorities

Regular training and both formal and informal contact with the authorities take place to ensure ongoing support for the program. In the early days of the program, it was not uncommon for ORWs to be arrested for possessing injecting equipment, as was the case on the first day of operation in 2004. Following regular formal and informal advocacy with public authorities, including work conducted through community committees, the arrest and harassment of ORWs now rarely occur.

4.6 Outreach to entertainment venues

On one or two evenings a week, the program director and program officers visit entertainment venues to reach out to sex workers in Wuzhou, who appear to use drugs such as ecstasy, ketamine and ice. In the absence of any formal assessment, however, staff are uncertain about the degree and nature of injecting drug use in this group.



Focus group discussion of HAARP peer educators



Interview with Wuzhou female injecting drug users



5. Maintaining and expanding existing activities

5.1 Continue to build relationships with female clients

The program recognises the mutual benefits of taking the time to establish relationships with female IDU clients. This is made possible by employing skilled male and female ORWs, adopting flexible hours of operation, and providing discreet services.

According to staff and management, establishing relationships and an environment for ongoing contact are central to effective programming. Experience shows that, once relationships have been established, they will form the basis on which services and contact can be provided and expanded to other female IDUs.

“In our experience, it is more difficult to obtain the trust of female IDUs than of male IDUs”, comments Zhong Jian, director of HIV/AIDS and Sexually Transmitted Disease Division of the Wuzhou Centre for Disease Control and Prevention. “Many are scarred from past trauma and rejection. Once trust and confidence [in the service] is there, then it represents the foundation for future work.”

Research shows that female IDUs are more likely than male IDUs to be past victims of sexual assault and/or violence and to have existing mental health problems such as post-traumatic stress disorder or depression. Moreover, research in China and other parts of Asia has shown that female IDUs experience much worse stigma than male IDUs, resulting in a more hidden population. Through this experience and understanding of female IDUs, the program manages to reach over 100 women each month.

5.2 Develop more information materials and sessions for female IDU clients

During interviews, female clients and staff identified gaps in knowledge and a need for more information about certain topics, including the following:

- vein management
- hepatitis C ('We know the name of the hep C virus but do not understand it.')
- pregnancy and drug use
- preventing mother-to-child transmission of HIV and hepatitis C
- women's health regarding breast cancer and menstrual cycles
- methadone maintenance therapy.

Clients see some benefit in coming together for information sessions as it is a way to learn about health issues, share ideas (as they found in focus group discussions) and address some of the issues of social isolation that they experience.

Program staff noted the need for more sessions for clients, with an emphasis on innovative and participatory methods of information-sharing and limiting sessions to one hour.

5.3 Use a female peer-to-peer model

The Wuzhou program recognises the need for a gender balance among ORWs to maximise reach and improve the quality of the services offered. As Table 2 illustrates, this gender balance has not been addressed in other cities and counties in the China program to the same degree as it has been in Wuzhou (for the most part, not at all). The Wuzhou program will continue to support its existing male and female ORWs and, where possible, explore opportunities to recruit more female ORWs in the future.

5.4 Training and providing resources and tools to ORWs

ORWs spoke of the need for more regular training and capacity building, as well as for tools, specifically picture-based manuals, that enable them to deliver more effective support, information and referral to IDU clients and that clients can view when visiting

the DIC. They acknowledged the need for a better understanding of women's health issues, as well as more general health issues such as hepatitis C.

5.5 Expand the program to partner with more community committees

With additional resources, the program hopes to expand the community committee model to other communities and sub-districts in Wuzhou. Through these partnerships, the program is positioning itself to expand geographical coverage and access to clean injecting equipment and information for female and male IDUs. These partnerships also enable the program to expand its advocacy work with the community and sensitise it to the harm reduction approach.

5.6 Build relationships with public authorities

Incarceration continues to be a risk for both male and female IDUs in Wuzhou. Currently, 20 people are in detoxification centres and about 300 in community-based detoxification (as this information relates to the detoxification centres, HAARP in Wuzhou was unable to obtain disaggregated data).

The Wuzhou Centre for Disease Control and Prevention and HAARP in Wuzhou have achieved a lot in building practical collaboration with public authorities despite an unsupportive policy environment. This has reduced the incidence of police harassment and arrest of ORWs while undertaking their outreach work over the 6 years since the program commenced. The program plans to continue to invest time and resources in promoting a supportive environment in which harm reduction services can be delivered through local advocacy and education.



6. Recommendations for further improving harm reduction services in Wuzhou

6.1 Conduct rapid assessment to inform further work with female IDUs including those who sell sex

Conduct a rapid assessment to further understand the needs and risk behaviour of sex workers to help inform more tailored responses for them. This process would explore the role of gatekeepers, potential reluctance among sex workers to access drug-related services (and how to overcome this), and the degree and nature of injecting and other drug use among this group in Wuzhou.

Depending on the findings of an assessment, the program in Wuzhou can consider expanding NSPs and other services to reach this important group of women.

6.2 Build commitment to the ‘nothing for us without us’ principle

‘Nothing for us without us’ is a core principle of HAARP. There are opportunities for the Wuzhou program to further demonstrate its commitment to this principle beyond recruiting female ORWs. The program can consider supporting the capacity and ability of female IDUs to participate in provincial, national or regional networks, working with IDUs to ensure that the issues of female IDUs are represented and better understood by officials at all levels and among their peers. Such activities can build self-confidence among female former IDUs and improve understanding and acceptance of gender-related issues related to drug use. At present, HAARP operates through the public system in China, which has no formal mechanism by which representatives of beneficiaries or beneficiaries themselves participate in public committees or boards. Opportunities may exist, however, to support participation in such networks or forums associated with the newly established Asia Network of People who Use Drugs and/or peer networks in China.

6.3 Promote and provide education on methadone maintenance therapy

During interviews and focus group discussions, respondents spoke of their concerns and, at times, lack of confidence in or understanding of MMT. This resulted in a number of women committing only partly to the program by combining their dose of methadone with heroin, attending the MMT clinic only half the number of times required each week, not enrolling for fear that methadone is more addictive than heroin, or dropping out of the program altogether. One female respondent dropped out of the program after combining her dose of methadone with diazepam, which caused an undesirable and unexpected physical reaction. According to the MMT clinic doctor, poor adherence and dropping out by both men and women are key issues for the program. Data show that women in Wuzhou are poorly represented in the program compared with their male counterparts. Currently, 30 registered female IDUs are enrolled, compared with 270 registered male IDUs.

HAARP can continue to play a role in educating both male and female IDUs about the benefits of the program and dispelling myths and misinformation associated with MMT. In this regard, the program is well positioned to (i) provide relevant information to IDU clients on MMT to ensure that they are aware of the potential benefits and side-effects of taking MMT and (ii) develop a better understanding of some of the real and perceived barriers to adherence, including the cost of travel, time required to attend the clinic daily and childcare. The program can also advocate gender-responsive changes on behalf of both male and female IDU clients.

6.4 Educate and conduct advocacy for subsidised hepatitis C treatment

In Wuzhou, 81% of IDU clients have tested positive for hepatitis C, including 16% of the women. At the moment, hepatitis C testing is free, but liver function tests and treatment are not and are beyond the reach of most IDUs. Nearly all respondents spoke of the need for more information about hepatitis C and subsidised treatment.

HAARP in Wuzhou could respond to this issue by developing and delivering targeted information and management sessions on hepatitis C for IDU clients. In addition, the program could play a role in advocating to health authorities that they offer subsidised hepatitis C treatment in the future.

6.5 Provide gender-sensitive training for staff and ORWs

In addition to providing training on specific health issues, staff members including ORWs would benefit from gender-related training to cover topics such as the following:

- stigma and how it affects men and women
- gender differences in dependence
- drug treatment for women
- violence and how this affects women
- obstacles to accessing services and role of gatekeepers, as well as relationship dynamics among drug users, particularly where drug use occurs with an intimate partner.

During interviews, a generic approach to and understanding of drug-related issues, including sexual and injection-related risk behaviour and service uptake, was often articulated. With more understanding of the gender issues that contribute to the unique vulnerability and risk behaviour of female IDUs, ORWs may be able to develop more informed strategies to reach them.

Through an improved understanding of gender-related issues, HAARP will be better placed to change the current program to improve services for existing female clients and reach the hidden population of female IDUs. Such strategies and changes may involve work with male IDUs to transform attitudes to gender such as risk communication and couples' counselling, developing a better understanding of the drug use behaviour of sex workers in Wuzhou, and improving and expanding referral networks to improve access for women and encompass a broader range of services for them, such as crisis support.

6.6 Develop targeted IEC materials and tools

ORWs expressed a need for education materials and tools to assist them in their outreach work. They specifically referred to picture-based manuals and other IEC materials.

When developing IEC materials, it is important for the program to be systematic, developing clear objectives and adopting a participatory process that involves the target audience at different stages of material development. Without such processes, the program runs the risk of developing materials that do not respond to the particular needs of clients.

7. Conclusion

Since 2004, HAARP in Wuzhou has gradually increased the number of female IDU clients who attend services by committing to a number of core and gender-responsive approaches. These include the following:

- placing emphasis on building trust and understanding with female clients over time
- offering mobile distribution of NSP services, thereby enabling discreet and confidential access for female IDUs
- offering flexible hours of service
- recognising the lived experience and value of peer-to-peer support through the recruitment and ongoing support of male and female former IDUs as ORWs
- taking a partnership approach to the community through community committees, which has expanded the geographic coverage of program, improved access to NSP services for male and female clients, and fostered a more supportive environment in which uninterrupted harm reduction services can be provided
- continuously working with local public authorities through formal and informal advocacy and sensitisation about the principles of harm reduction, HIV issues in the community, and the benefits of the program for individuals and the wider community.

In the case of Wuzhou, some of the changes and successes described might not have occurred had it not been for the vision and commitment of the female director. Since the inception of the program, the director has recruited and mentored female ORWs who continue to support the work of HAARP. With such leadership and mentoring, the program has been able to ensure a representative balance of male and female ORWs and former IDUs, which is the foundation of the gender-responsive work being undertaken in Wuzhou.



HAARP Technical Support Unit

Chamnan Phenjati Building
19th Floor, 65/159 Rama 9 Road
Huay Kwang, Bangkok 10310, Thailand

Tel: + 66 2 643 8191-2

Fax: + 66 2 643 8193

www.haarp-online.org

