

HIV AND YOUNG PEOPLE WHO INJECT DRUGS



Empowered lives.
Resilient nations.



A TECHNICAL BRIEF

HIV AND YOUNG PEOPLE WHO INJECT DRUGS



World Health
Organization



UNFPA



UNHCR
The UN Refugee Agency



nswp



THE WORLD BANK



INPUD
International Network of People who Use Drugs



UNDP



UNESCO

Empowered lives.
Resilient nations.



UNODC
United Nations Office on Drugs and Crime



MSMGF



UNAIDS



HIV YOUNG
LEADERS FUND



IIO



unicef

WHO/HIV/2015.10

© World Health Organization 2015

All rights reserved. Publications of the World Health Organization are available on the WHO website (www.who.int) or can be purchased from WHO Press, World Health Organization, 20 Avenue Appia, 1211 Geneva 27, Switzerland (tel.: +41 22 791 3264; fax: +41 22 791 4857; e-mail: bookorders@who.int).

Requests for permission to reproduce or translate WHO publications –whether for sale or for non-commercial distribution– should be addressed to WHO Press through the WHO website (www.who.int/about/licensing/copyright_form/en/index.html).

The designations employed and the presentation of the material in this publication do not imply the expression of any opinion whatsoever on the part of the World Health Organization concerning the legal status of any country, territory, city or area or of its authorities, or concerning the delimitation of its frontiers or boundaries. Dotted lines on maps represent approximate border lines for which there may not yet be full agreement.

The mention of specific companies or of certain manufacturers' products does not imply that they are endorsed or recommended by the World Health Organization in preference to others of a similar nature that are not mentioned. Errors and omissions excepted, the names of proprietary products are distinguished by initial capital letters.

All reasonable precautions have been taken by the World Health Organization to verify the information contained in this publication. However, the published material is being distributed without warranty of any kind, either expressed or implied. The responsibility for the interpretation and use of the material lies with the reader. In no event shall the World Health Organization be liable for damages arising from its use.

Layout by L'IV Com Sàrl, Villars-sous-Yens, Switzerland.

Printed by the WHO Document Production Services, Geneva, Switzerland.

TABLE OF CONTENTS

ACKNOWLEDGEMENTS	2
GLOSSARY	3
Definitions of some terms used in this technical brief	3
INTRODUCTION	4
YOUNG PEOPLE WHO INJECT DRUGS	6
HIV RISK AND VULNERABILITY	8
Sharing non-sterile injecting equipment	8
Unprotected sex	8
Changes during adolescence	8
Social marginalization and discrimination	8
Racial and ethnic marginalization	9
Young women	9
Sexual exploitation/selling of sex	9
LEGAL AND POLICY CONSTRAINTS	10
Criminalization	10
Police harassment and violence	10
Legal minority status	10
Policy and research	11
SERVICE COVERAGE AND BARRIERS TO ACCESS	12
Need for additional services for young people	12
Lack of youth-friendly and youth-focused services and programmes	12
Parent/guardian consent	12
Stigma and discrimination by service-providers	12
Lack of integrated services and insufficient capacity	13
Poor access to HIV testing and treatment	13
SERVICES AND PROGRAMMES ADDRESSING THE NEEDS AND RIGHTS OF YOUNG PEOPLE WHO INJECT DRUGS	14
APPROACHES AND CONSIDERATIONS FOR SERVICES	17
A. Considerations for programmes and service delivery	17
B. Considerations for law and policy reform, research and funding	19
Annex 1. The United Nations Convention on the Rights of the Child (1989)	21
REFERENCES	22

ACKNOWLEDGEMENTS

This technical brief series was led by the **World Health Organization** under the guidance, support and review of the **Interagency Working Group on Key Populations** with representations from: Asia Pacific Transgender Network; Global Network of Sex work Projects; HIV Young Leaders Fund; International Labour Organisation; International Network of People who use Drugs; Joint United Nations Programme on HIV/AIDS; The Global Forum on MSM and HIV; United Nations Children’s Fund; United Nations Development Programme, United Nations Office on Drugs and Crime; United Nations Educational, Scientific and Cultural Organization; United Nations Populations Fund; United Nations Refugee Agency; World Bank; World Food Programme and the World Health Organization.

The series benefited from the valuable **community consultation and case study contribution** from the follow organisations: Aids Myanmar Association Country-wide Network of Sex Workers; Aksion Plus; Callen-Lorde Community Health Center; Egyptian Family Planning Association; FHI 360; Fokus Muda; HIV Young Leaders Fund; International HIV/AIDS Alliance; Kimara Peer Educators and Health Promoters Trust Fund; MCC New York Charities; menZDRAV Foundation; New York State Department of Health; Programa de Política de Drogas; River of Life Initiative (ROLi); Save the Children Fund; Silueta X Association, Streetwise and Safe (SAS); STOP AIDS; United Nations Populations Fund Country Offices; YouthCO HIV and Hep C Society; Youth Leadership, Education, Advocacy and Development Project (Youth LEAD); Youth Research Information Support Education (Youth RISE); and Youth Voice Count.

Expert peer review was provided by: African Men Sexual Health and Rights; AIDS Council of NSW (ACON); ALIAT; Cardiff University; Family Planning Organization of the Philippines; FHI 360; Global Youth Coalition on HIV/AIDS; Harm Reduction International; International HIV/AIDS Alliance; International Planned Parenthood Federation; Joint United Nations Programme on HIV/AIDS Youth Reference Group; Johns Hopkins Bloomberg School of Public Health; London School of Hygiene and Tropical Medicine; Mexican Association for Sex Education; Office of the U.S. Global AIDS Coordinator; Save the Children; Streetwise and Safe (SAS); The Centre for Sexual Health and HIV AIDS Research Zimbabwe; The Global Forum on MSM and HIV Youth Reference Group; The Global Network of people living with HIV; Thubelihle; Youth Coalition on Sexual and Reproductive Rights; Youth Leadership, Education, Advocacy and Development Project (Youth LEAD); Youth Research Information Support Education (Youth RISE); and Youth Voice Count.

Cover photo: Humanitarian Action Fund’s mobile clinic in St. Petersburg, Russia / © Lorena Ros for the Open Society Foundations

The technical briefs were written by Alice Armstrong, James Baer, Rachel Baggaley and Annette Verster of WHO with support from Tajudeen Oyewale of UNICEF.

Damon Barrett, Gonçalo Figueiredo Augusto, Martiani Oktavia, Jeanette Olsson, Mira Schneiders and Kate Welch provided background papers and literature reviews which informed this technical series.

GLOSSARY

Definitions of some terms used in this technical brief

Children are people below the age of 18 years, unless, under the law applicable to the child, majority is attained earlier.⁽¹⁾

Adolescents are people aged 10–19 years.⁽²⁾

Young people are those aged 10–24 years.⁽³⁾

“Young people who inject drugs” in this document refers to people 10–24 years of age who inject non-medically sanctioned psychotropic (or psychoactive) substances, including children 10–17 years and adults 18–24 years.

While this technical brief uses age categories currently employed by the United Nations and the World Health Organization (WHO), it is acknowledged that the rate of physical and emotional maturation of young people varies widely within each category.⁽⁴⁾ The United Nations Convention on the Rights of the Child recognizes the concept of the evolving capacities of the child, stating in Article 5 that direction and guidance, provided by parents or others with responsibility for the child, must take into account the capacities of the child to exercise rights on his or her own behalf.

Key populations are defined groups who due to specific higher-risk behaviours are at increased risk of HIV, irrespective of the epidemic type or local context. They often have legal and social issues related to their behaviours that increase their vulnerability to HIV. The five key populations are men who have sex with men, people who inject drugs, people in prisons and other closed settings, sex workers, and transgender people.⁽⁵⁾

People who inject drugs refers to people who inject non-medically sanctioned psychotropic (or psychoactive) substances. These drugs include, but are not limited to, opioids, amphetamine-type stimulants, cocaine, hypno-sedatives and hallucinogens. Injection may be through intravenous, intramuscular, subcutaneous or other injectable routes.

This definition of injecting drug use does not include people who self-inject medicines for medical purposes, referred to as “therapeutic injection”, nor individuals who self-inject non-psychotropic substances, such as steroids or other hormones, for body shaping or for improving athletic performance.

INTRODUCTION

Young people aged 10–24 years constitute one-quarter of the world's population,⁽⁶⁾ and they are among those most affected by the global epidemic of human immunodeficiency virus (HIV). In 2013, an estimated 4.96 million people aged 10–24 years were living with HIV, and young people aged 15–24 years accounted for an estimated 35% of all new infections worldwide in people over 15 years of age.⁽⁷⁾

Key populations at higher risk of HIV include people who sell sex, men who have sex with men, transgender people and people who inject drugs. Young people who belong to one or more of these key populations – or who engage in activities associated with these populations – are made especially vulnerable to HIV by widespread criminalisation, discrimination, stigma and violence, combined with the particular vulnerabilities of youth, power imbalances in relationships and, sometimes, alienation from family and friends. These factors increase the risk that they may engage – willingly or not – in behaviours that put them at risk of HIV, such as frequent unprotected sex and the sharing of needles and syringes to inject drugs.



Although global coverage of harmreduction services has slowly increased, there is a lack of services focused on and accessible to young people, despite low ages of initiation into injecting drug use in many countries and important differences in vulnerability and risk between younger and older

Governments have a legal obligation to respect, protect and fulfil the rights of children to life, health and development, and indeed, societies share an ethical duty to ensure this for all young people. This includes taking steps to lower their risk of acquiring HIV, while developing and strengthening protective systems to reduce their vulnerability. However, in many cases, young people from key populations are made more vulnerable by policies and laws that demean, criminalize or penalize them or their behaviours and by education and health systems that ignore or reject them and that fail to provide the information and treatment they need to keep themselves safe.

The global response to HIV largely neglects young key populations. Governments and donors fail to adequately fund research, prevention, treatment and care for them. HIV service-providers are often poorly equipped to serve young key populations, while the staff of programmes for young people may lack the sensitivity, skills and knowledge to work specifically with members of key populations.

According to joint estimates by the United Nations Office on Drugs and Crime, the World Health Organization (WHO) and the Joint United Nations Programme on HIV/AIDS (UNAIDS), an estimated 12.7 million (8.9 million–22.4 million) people globally inject drugs,⁽⁸⁾ around 80% of whom live in low- and middle-income countries.⁽⁹⁾ The age distribution is not known. The continued high prevalence of injecting drug use, combined with insufficient coverage of harm-reduction programmes, is of concern because of the strong association of unsafe injecting with risk for transmission of HIV and other infections such as viral hepatitis.^(10,11) Although global coverage of harm-reduction services has slowly increased, there is a lack of services focused on and accessible to young people, despite low ages of initiation into injecting drug use in many countries and important differences in vulnerability and risk between younger and older people who inject

预览已结束，完整报告链接和二维码如下：

https://www.yunbaogao.cn/report/index/report?reportId=5_12656

