

UGANDA HARM REDUCTION N ETWORK (UHRN)

2019

ANNUAL REPORT



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MESSAGE FROM THE BOD CHAIRPERSON

I am pleased to introduce to you the 2019 Annual report for Uganda Harm Reduction Network (UHRN). For the year 2019, Uganda Harm Reduction Network has worked to realise the ambitions of the visionary like-minded community of people who use and inject drugs. Our journey so far has validated their bravery and vision. It has also been a journey of transformation and change, sometimes laden with tears and uncertainty. Yet today we celebrate the milestones.

Uganda Harm Reduction Network's achievements are notable, given its humble and challenging environment in the course of the year. Uganda Harm Reduction Network is renowned in Uganda and beyond for leading advocacy and championing rights of community of people who use and inject drugs in Uganda. Many young PWUD Leaders have emerged from Uganda Harm Reduction Network and founded organizations that are thriving.

Our membership has grown from an initial 45 to 86 and 27 to 30 both individual and subscribing organizations respectively. Our members are more sensitized to be conscious of their health through our very successful peer mentorship and outreach programmes. As the years go by, we continue to witness promising collaboration with law enforcement officers who before were abusive and unapproachable. There is also a promising degree of acceptance and tolerance at service delivery points and community level in communities of people who use and inject drugs.

The hardships are not over yet and a lot more needs to be done. New challenges emerge with shrinking civic space every other day that gives us the strength and impetus to carry on with our mission. Punitive laws, negative public perception of drug use, ill health, stigma, discrimination and physical abuse are among the numerous challenges that we continue to face. Increasing, drug use is posing a major threat to the health and wellness of our members, increasing homelessness due to family rejection and unemployment. The board of directors continued to play its role of conducting the affairs of the organisation in accordance with its constitution, formulation of policies and general governance of the secretariat, exercising its supervisory and advisory role.

The board sat four times during the year for better execution of its duties and mandate. Some of our outstanding resolutions during the board meetings were to coordinate and strengthen the fundraising arm for UHRN secretariat.

We remain grateful for the generous support from a cross-section of stakeholders. We look forward to continue working with you to enrich our vision.

Thank you

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Board Chairperson

MESSAGE FROM THE EXECUTIVE DIRECTOR

This annual report summarises the activities and achievements of UHRN based on its strategic objectives and a financial performance for the financial year 2019.

Under capacity enhancement and movement building program, UHRN has established 2 Regional offices in Luweero and Masaka, orientated 30 grass root drug user led



and serving networks and CBOs in organizational leadership, resource mobilisation, M&E, financial management advocacy research and documentation, supported grass root PWUD harm reduction community advocates to participate in key advocacy spaces and exchange learning fore, conducted awareness raising sessions, trained paralegals who have reported 1705, with 1023 cases handled and 682 cases and facilitated trainings of 80 PWID community peer educators

Through policy and advocacy; UHRN has conducted 46 engagement dialogues that engaged 820 stakeholders, conducted the Support Don't Punish Campaign, PWUD community engagements with the national MAT taskforce, participated in the international and advocacy spaces such as the Sixty-second session of the Commission on Narcotic Drugs (CND) meeting, the 26th Harm Reduction International Conference (HR19) and the ICASA Conference in Kigali.

With Research and Knowledge management; UHRN conducted a rapid situation assessment with PWIDS, had geo-mapping and profiling of seventy four (74) PWUID hotspots in the five divisions of Kampala and Wakiso and a research study on "Access to HIV treatment among people who use drugs in Uganda".

Under Access to Health and Justice; UHRN has capacitated the operationalization of UHRN Drop in Centre, conducted targeted grass root PWUD HIV testing and Counselling outreaches reaching over 2,600 drug user were reached with HCT services in 2019, provided monthly facilitation of paralegals and conducted community sensitization on access to MAT, diversion strategy, human rights roles and responsibilities of duty bearers and right holders. UHRN has sustained funding from prominent donors which has enabled the network to implement several projects that reach the PWUID community and has further adopted various M&E systems and data tracking tools to track progress of implementation and report on achievements of UHRN programs.

On behalf of UHRN I would like to appreciate the tireless efforts and contribution of its dedicated stakeholders including; donors/ funders, staff, network members, partners and the community of people who use drugs towards achievement of its annual work plan.

Thank you Wamala Twaibu Executive Director

About Uganda Harm Reduction Network

Uganda Harm Reduction Network (UHRN) is a youth led initiative established in 2008 under Reg.No.181733 as a national, not-for-profit NGO to champion and coordinate people who use drugs' health (HIV/TB, Hepatitis & STI), advocacy and harm reduction programmes to respond to the drug use crisis in Uganda. The network provides a country-wide systematic and all-inclusive coordination structure for people who use and inject drugs (PWUIDs) with a growing subscriber base of over 4500 PWIDs and over 30 grassroot drug user led and serving CSOs and CBOs spread across the 40 districts in Uganda.

Vision

A healthy society of PWUDs free of HIV/AIDS, TB and HEPs in Uganda

Mission

To improve the health, human rights and socio-economic well-being of PWUDs through leadership building, collaboration, and capacity enhancement of UHRN members to uphold Harm Reduction Intervention (HRI) in Uganda

Strategic goal

Strengthened systems and capacity of UHRN secretariat and members to build a vibrant harm reduction movement (HRM) that contributes to the realization of universal health access targets in Uganda.

Core values

- Transparency, Integrity and Accountability
- Respect for dignity and diversity of all persons
- Meaningful involvement and participation of drug user community
- Leadership and Stewardship
- Team work

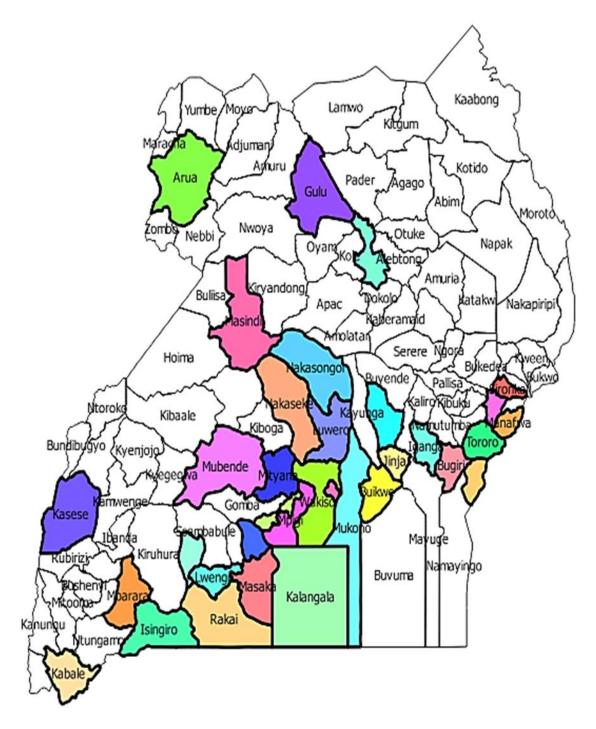
Core Thematic Areas

- Capacity enhancement and movement building
- Policy and Advocacy
- Access to health and justice services
- Research and Knowledge
 Management

UHRN strategic direction

- Strengthening Uganda Harm Reduction Network for sustainability
- UHRN to be a "National Hub" of capacity enhancement for PWUIDs led and serving organizations
- Watch dog for PWUID's improved access to health and justice services
- Engaging in policy analysis and Advocacy initiatives
- ✤ Generating evidence through research and documentation

UHRN COVERAGE DISTRCTS



INTRODUCTION

This report highlights the progress of UHRN activity based on its core thematic areas. This report includes program activity, financial performance and position

THEMATIC AREAS PERFORMANCE

The progress of UHRN's program activities is based on the following core thematic areas;

Thematic Area 1: Capacity enhancement and movement building

1.1.Orientation for grassroot drug user led and serving networks and CBOs.

UHRN membership has grown from an initial 27 to 30 subscribing organizations and this year UHRN convened orientation workshops for 30 member and grass root organizations

with in the four regions of Uganda to enhance their capacity in identifying and addressing the legal policy and structural barriers that impede equitable access to HIV and other health services for people who use drugs and be able to organise and champion harm reduction advocacy agenda in Uganda.



These were also oriented in;

- Governance and management,
- Advocacy and communications
- Knowledge management,
- Financial management and Resource mobilization
- Monitoring and Evaluation, Documentation and reporting on human rights violations for drug users.

The member organisations that were capacitated included; AWAC, SMUG, POMA, MYHD, MYCE, UYP, WWM, TLU, ACER, PODIUM, Alliance for Key Population Advocacy, Hope Mbale, Women in Mix, MAKOKODA, ATIGU, YES, TAAG, YIHR, RACD, Youth in Harm Reduction Gulu, West Nile Rain Bow in Arua, D13, Sober Up, Men's Rights Ambassadors, SWING-UG), Next Generation Uganda, HEMTOG.

1.2. Mentorships trainings for PWID community paralegals and peer educators.

UHRN organised orientation trainings for 20 male and female grass root PWID community paralegals from the 5 regions of Uganda to enrich their ability in documentation and following up human rights cases/violations experienced by PWUDs in contact with the criminal justice system.

The trained paralegals have been able to register **1705**, with **1023** cases handled and **682** cases pending across all the regions with the support from HRAPF



UHRN also facilitated trainings of 80 PWID community peer educators as ambassadors to enhance response to HIV, TB, SRHR, harm reduction and other health services for PWUD in the four regions of Uganda.

The trained peers have been able to mobilse and link over **3021** PWIDS for HIV, TB SRHR Services and harm reduction services and it has increased access to HIV, TB SRHR Services and harm reduction services among PWUD.



Photo Voice Advocacy Initiative: UHRN empowered and amplified voices of grassroot PWUD harm reduction community Activists in Kampala and Wakiso through the Photo Voice advocacy initiative to ably document and share community experiences through photos and captions as evidence for rampant human rights violations, GBV and stigma and discrimination during key advocacy spaces/events to hold Government and other non-state actors accountable. The photo voice initiative helped to unmask the PWUD community needs through enhanced PWUD community and service providers' access to information on MAT, HIV prevention, care and diagnosis and other harm reduction services. A good number

of PWUD community advocates feel more empowered to demand for what they deserve. On the same note, the two police stations in Kampala have demonstrated a positive shift in attitude and approach from the previous 'Arrest & Detain' to 'Arrest and Refer for services'

1.3.Technical support supervision

Technical support supervision was provided to five (5) UHRN member organizations in the four regions of Uganda informed by Organisation Capacity Assessment (OCAT) that was conducted by UHRN to its member organisations in 2019.

The support supervision encompassed coaching, mentoring and one on one capacity building to member organization staff to enable them effectively run their day to day affairs of their organizations.



The member organisations included; Youth Community Empowerment Group Mbale, Youth Initiative for Harm Reduction Mbarara, Gulu Youth for Harm Reduction, Women in Mission Mbale, Teens link Uganda and Makindye Youth for Health and Development.

Key Achievement

Increased buy-in by key stakeholders on the drafting of the Technical Guidelines for Universal Access to HIV Prevention, Treatment and Care for People who use Alcohol, Drugs and Other Substances

2.1. Stakeholder engagement dialogues.

UHRN conducted 46 engagement dialogues that engaged 820 stakeholders from Ministries, Department and Agencies, AIDS Development Partners, civil society organisations and duty bearers including religious leaders, opinion leaders, cultural leaders, civil society advocates, health service providers, law enforcement agencies and paralegals.

The dialogues have been instrumental in advancing the human rights of people who use and

inject drugs and enhancing access to improved HIV, TB, SRHR, and harm reduction service for PWID.



Stakeholders; law enforcement, health workers and like-minded civil society representatives after sensitization meeting

2.2.Support Don't Punish campaign.

UHRN championed the commemoration of the annual *Support Don't Punish* advocacy global campaign with the community of people who use drugs and harm reduction advocates in Uganda. The *Support Don't Punish* is an annual campaign that aims at influencing policies that under pin rather than undermine the health and human rights of people who



use drugs and during the campaign we were able to mobilise and sensitise **108** stakeholders on the human rights, roles and responsibilities of people who use drugs.

2.3.PWUD community engagements with the national MAT taskforce:

As a move to unmask the underlying gaps for MAT initiation such as the plan to deliver MAT through a centralized stand-alone Government facility at Butabika national referral hospital, UHRN commenced the mission to unlock the potential MAT access barriers by generating evidence as a basis to formulate a strong case to influence critical considerations and actions for a holistic rollout plan for MAT. In this quest, UHRN generated;

- **1.** PWUD Hot spot list serve
- 2. MAT community Needs Assessment Report and
- **3.** Printed and shared existing PWUD Study reports with the MAT taskforce committee members and other key stakeholders. These included; the Needle & Syringe Programme Evaluation Report, the Crane Survey Report on high PWID risks and the PWID Population estimation & rapid assessment on harm reduction and HIV prevention report



Some of the PWUID community members during the MAT engagements

2.4.International foras

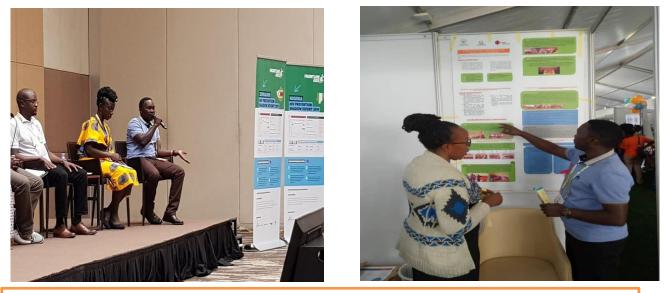
Sixty-second session of the Commission on Narcotic Drugs (CND) meeting. UHRN was well represented by the Executive Director at the CND meeting in Vienna which provided an opportunity to take stock of the implementation of the commitments made to jointly address and counter the world drug problem, in particular in the light of the 2019 target date set in the Political Declaration and Plan of Action towards an Integrated and Balanced Strategy to Counter the World Drug problem.

The 26th Harm Reduction International Conference (HR19). The UHRN PITCH coordinator together with the PITCH CFP at the 2019 International Harm Reduction Conference in Porto Portugal and only global meeting that has regularly provided knowledge-sharing, networking, and discussion of best practices in the field of harm reduction across the globe.



The PITCH Coordinator and PITCH Country Focal Person at the HR 19 Conference

The ICASA Conference in Kigali. This was an important PWUD fora for community sharing for insights, experiences and best practices about relevant topics and issues that affect people who use drugs at national, regional and global level.



Key achievements

- 1. Establishment of the Medically Assisted Treatment Task force for establishment of the first Medically Assisted Therapy Treatment Clinic in Uganda.
- 2. The MAT rollout plan was revised and MoH committed to fast track development of MAT SoPs,
- **3.** The committee adopted the Hub and Spoke MAT delivery model with a plan to have 3 MAT access points including the UHRN Drop in Centre in the divisions closer to the PWUD Dens/Hot spots.
- **4.** Development of Technical Guidelines for Universal Access for HIV prevention, treatment and care for people who use drugs and other substances.

Uganda Harm Reduction Network in her mandate to carry out research that informs policy and programming for people who use drugs in Uganda, In 2019, UHRN has engaged in a number of researches including;

- A rapid situation assessment with PWIDS about their experiences on when and how they transition into injection drug use. Semi-structured interviews and 12 focus groups held were conducted among 125 PWID (102 males and 23 females) and these were recruited through outreach and snow-ball sampling.
- 2. Geo-mapping and profiling of seventy four (74) PWUID hotspots in the five divisions of Kampala and Wakiso
- 3. A research study on "Access to HIV treatment among people who use drugs in Uganda" in collaboration with the University of Wisconsin. The research focused on people who use drugs and living with HIV and health workers (UHRN DiC, AWAC DiC, MARPI, Butabika Hospital, Kisenyi Health centre III and Kisugu Health Centre III. Research findings are yet to be published.



A team from Wisconsin University, a partner university from America, after consultation on the research about access to HIV services by people who inject drugs in Uganda.

4. A needs assessment to establish PWID perception on the establishment of the first Medically Assisted Treatment Clinic in Uganda. The assessment involved country consultations with PWID networks across Uganda.



During the consultations with the PWID community on the establishment of the first Medically Assisted Treatment Clinic in Uganda

Key achievements

Rapid assessment research finding were published in the International Harm Reduction Journal https://harmreductionjournal.biomedcentral.com/articles/10.1186/s12954-019-0350-2

Thematic Area 4: Access to Health and Justice

4.1. Access to health

Capacitate operationalisation of UHRN Drop in Center

UHRN has supported the functionalisation of the PWID drop in Center with adequate skilled staff, commodities and equipments. In terms of staffing, the DIC has a full time counselor, clinician, data clerk, community linkage facilitators, peer educators and Monitoring & Evaluation officer. The DiC is further equipped with examination bed, recreational activities and triaging equipment.

With the operationalisation of the DiC, UHRN has been able to provide a comprehensive package of harm reduction and HIV/TB prevention services, TB screening, PrEP and PEP screening, condom promotion and distribution, SRH among the people who use drugs.

The DiC has incorporated demand creation strategies that include; Football bonazas (tackle Africa), Community Outreach's, HIV Self-testing, Social Network Strategies, Peer to Peer approach and Assisted Partner Notification.



A counsellor attending to a client at the UHRN DiC

Conducted targeted grassroot PWUD HIV testing and Counseling outreaches

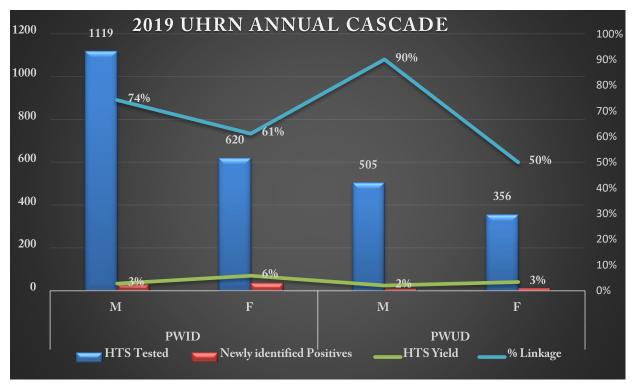


During community outreach in one of the hotspots in Kampala central

PP/KP Category	Gender	HTS Tested	Newly identified Positives	HTS Yield	% Linkage
PWID	Μ	1119	31	3%	74%
	F	620	36	6%	61%
PWUD	Μ	505	10	2%	90%
	F	356	12	3%	50%
Total	М	1624	41	3%	78%
	F	976	48	5%	58%
Grand Total		2600	89	3%	67%

Source: PWUD Community HTS Outreach Data 2019

From the above cascade, 2,600 drug user were reached with HCT services in 2019, out of the 2,600 drug users 1,624 were male and 976 were female. Of the 1,624 male reached 1,119 were injecting with 31 newly identified positives and 505 were non-injecting. Out of 976 female drug users reached 620 were injecting with 36 newly identified positive and 356 were non-injecting. Out of 89 newly positive identified, 67% were linked to care to different facilities



4.2. Access to Justice

In collaboration with legal patners, UHRN has provided legal services to the community of people who use drugs including counseling, negotiating for community service, sensitization of both the community and law enforcement, linkage and referrals, reporting and documentation of human rights violation cases of people who use drugs in contact with the criminal justice system.

4.2.1. Provide monthly facilitation of paralegals

A total of ten(10) UHRN community grassroot people who use drugs paralegals have been provided with monthly stipend to document, manage and report human rights violations of people who use drugs in contact with the criminal justice system.

Among the common cases reported included; possession of narcotic drugs (29%), rogue and vagabond (19%), police raid (24%), gender based violence (2%), Drug use (3%), theft (8%), and frequenting a place used for smoking opium (8%). Most cases were handled in partnership with Human Rights Awareness and Promotion Forum.

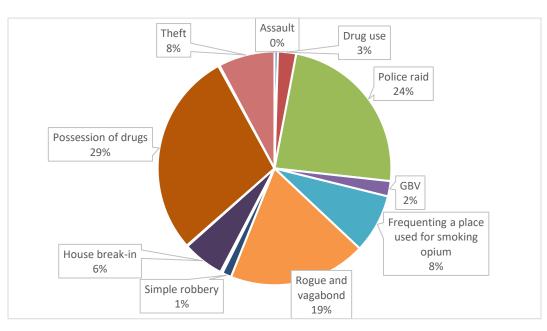


Figure 1: Summary of PWUD Reported Cases

For a period of one year **1705** cases were registered, with **1023** cases handled and **682** cases pending across all the regions as illustrated in the table below;

Table 1: Cases interfaced with by PWUDs across the harm reduction implementingregions of Uganda from the period of JAN-NOV 2019.

Nature of cases	Num	ber of	cases			Num	nber complete			Number pending					
	С	W	WN	Е	Ν	С	W	WN	Е	Ν	С	W	WN	Е	N
Assault	2	0	3	0	3	2	0	1	0	1	0	0	2	0	2
Drug use	11	9	7	7	9	9	9	3	6	5	2	0	4	1	4
Police raid	109	87	52	101	56	65	52	31	61	34	44	35	21	40	22
GBV	20	11	4	1	0	12	7	2	0	0	8	4	2	1	0
Frequenting a place used for smoking opium	52	11	1	72	3	41	8	1	44	2	11	3	0	28	1
Rogue and vagabond	150	66	21	51	37	90	43	13	29	21	60	23	8	22	16
Simple robbery	11	0	7	4	0	7	0	0	0	0	4	0	7	4	0
Counterfeit	1	0	0	0	0	1	0	0	0	0	0	0	0	0	0
Threatening violence	1	1	0	0	2	1	0	0	0	1	0	1	0	0	1
House break-in	78	11	0	9	0	47	0	0	0	0	31	11	0	9	0
Drug trafficking	2	0	0	0	0	1	0	0	0	0	1	0	0	0	0
Possession of drugs	190	103	27	101	65	114	62	16	61	39	76	41	11	40	26
Public nuisance	3	0	0	0	0	3	0	0	0	0	0	0	0	0	0
Theft	39	24	0	69	1	23	14	0	41	0	16	10	0	28	1
TOTAL	669	323	122	415	176	416	195	67	242	103	253	128	55	173	73

Source: UHRN data base for human rights violations of people who use drugs in contact with the criminal justice system, 2019

NOTE:

C-Central region (KAMPALA AND WAKISO),

W-Western region (MBARARA),

WN-Westnile (ARUA),

E-Eastern region (MBALE) and

N-Northern region (GULU)

Figure 2: Forms of human rights violations experienced by People who use drugs and the actions taken by UHRN towards mitigating the risks.

Nature of cases **Actions taken Forms of human rights** • Public nuisance • Counseling violation • Rogue and vagabond • Securing police bond • Beaten • Assault • Negotiating for community • Detained beyond 48 hours • Simple robbery service • Torture • Threatening violence • Sensitization of both the • Remanded without charges • Frequenting a place used for community and law • Denied legal representation smoking opium enforcement • Denied access to friends and • Possession of drugs • Linkage to health care relations • Theft • Family reintegration • Family rejection • Drug use • Linkage to human rights • Denied access to health care and • Counterfeit enforcement agencies treatment • Drug trafficking • Filing a case against the • Extortion perpetrators of violence • Illegal eviction

- Alternative dispute resolution
- Referral to HRAPF lawyers

2.2. Community sensitization on access to MAT, diversion strategy, human rights roles and responsibilities of duty bearers and right holders

• Gender based violence

• Making statement under duress

• Assault

Community sensitization meetings were conducted on human rights roles and

responsibilities of duty bearers and right holders with people who use drugs, community leaders, local law enforcement officers and local government leaders.

Through the sensitization dialogues we were able

to; conduct thirteen (13) dialogues and sensitized *260* duty bearers and rights holders about the laws and policies affecting service up take for people who use drugs and the roles and responsibilities of duty bearers and rights holders on their roles and responsibilities in extending services to PWUDS.

Among the stakeholders engaged included opinion leaders, community leaders, law enforcement officers on human rights and harm reduction advocacy

Key achievements:

- \clubsuit As a result of these workshops, it has expedited the finalizing the harm reduction
 - guidelines and the process of establishing the Medically Assisted Therapy Treatment Centre in Uganda.
- Police committed to work in collaboration with UHRN to advance referral for people who use drugs for further management.

Key outcome: Duty bearers and rights holders committed to advance advocacy for harm reduction in Uganda.



Law enforcement officers, health workers and like- minded CSOs and community members working on human rights violations of PWUD in contact with the criminal justice system in Uganda during the dialogue

Thematic area 5: Resource Mobilisation

UHRN has sustained funding from prominent donors including Frontline AIDS, Open Society Initiatives for Eastern Africa (OSIEA), Global Fund through The AIDS Support Organisation (TASO) and Centre for Diseases Control through partners; Mild May Uganda, Rakai Health Sciences Program (RHSP) and Infectious Diseases Institute (IDI)

With support from the donors, UHRN has been able to implement several projects that include the Key Population Investment Fund (KPIF) for Masaka, Kampala and Mubende Regions; Partnership to Inspire and Connect the HIV Response (PITCH) in the four regions of Uganda; Sustaining a strong movement of harm reduction and human rights networks to respond and create demand for Harm reduction services in Uganda.

Thematic area 6: Program Monitoring and Evaluation

For monitoring, evaluation and reporting, UHRN has adopted the WANDA system from the Partnership to Inspire, Transform and Connect the HIV (PITCH) response project and the HYBRID system from the President's Emergency Plan for AIDS Relief (PEPFAR). These systems are employed to track progress of implementation and report on achievements of UHRN programs.

Data tracking tools include HCT client cards, Classification forms, prevention service forms, KP Prevention Register, community enrolment tools and register, peer diaries/calendars among others. These systems promote client anonymity and confidentiality and enable tracing of individual clients and services they received as well as counting of unique individual clients reached with services. They also enable generation of customised reports.

The following routine monitoring and evaluation activities were implemented; Weekly staff meetings, Monthly project progress review meetings, Quarterly unit progress review meetings, Mid-year and end of year progress review meetings, Monthly management meetings and staff appraisals.

SUMMARY OF KEY UHRN ACHIEVEMENTS IN 2019

THEMATIC AREA	CODE	INDICATOR	ANNUAL TARGET	ANNUAL PROGRESS	% ACHIEVED
Thematic Are	a 1: Caj	pacity enhancement and movement building			
		Number of grass root drug user led and serving networks and CBOs oriented to address the legal policy for PWUIDs		30	86%
	1.2	Number of mentorships trainings for PWID peer educators conducted	7	5	71%
	1.3	Number of mentorships trainings for PWID community paralegals conducted	5	3	60%
	1.4 Number of UHRN member organisations provided with technical support and capacity enhancement.		10	5	50%
	1.5	Number of UHRN Regional offices established	5	2	40%
Thematic area	a 2: Poli	cy and Advocacy			
	21	Number of stakeholder dialogues conducted in advancing the human rights of people who use and inject drugs.	60	46	77%
	2.2	Number of advocacy campaigns conducted	2	1	50%
	2.3	Number of policies/guidelines influenced	4	1	25%
	2.4	Number of technical working groups supported	6	4	67%
	2.5	Number of stakeholders sensitised on human rights of PWUIDs	1,500	1,000	67%
Thematic area	a 3: Res	earch and Knowledge management			
	3.1	Number of research studies conducted	2	1	50%
	3.2	Number of published journals	2	1	50%

Themati	c Area 4: A	ccess to Health and Justice			
4.1: Acce	ess to Healtl	1			
-	4.1.1	Number of harm reduction Drop in Centers created for PWIUDs	25	1	4%
	4.1.2	Number of targeted PWUID HTS hotspot outreaches conducted	100	65	65%
	4.1.3	Number of MAT Satellite centres influenced to be established	5	1	20%
	4.1.4	Number of PWID reached with HTS and other related health services	3,000	2,600	87%
	4.1.5	Number of new positive PWUIDs identified	360	89	25%
	4.1.6	Number of PWIDs linked to care	360	60	17%
	4.1.7	Number of condoms distributed	10,000	12,500	125%
	4.1.8	Number of IEC materials distributed	9,000	6,000	67%
	4.1.9	Number of PWID community peer educators trained as ambassadors to enhance response to HIV, TB, SRHR, harm reduction and other health services	55	28	51%
4.2. Acce	ess to Justic	e	,	, , , , , , , , , , , , , , , , , , , ,	
	4.2.1	Number of community paralegals trained on how to manage and report human violations against PWUIDs	50	10	20%
	4.2.2	Number of human rights violation cases for PWUIDS registered		1,705	
	4.2.3	Number of human rights violation cases for PWUIDS handled	1,705	1,023	60%
	4.2.4	Number of community sensitization on access to MAT, diversion strategy, human rights roles and responsibilities of duty bearers and right holders	20	13	65%
	4.2.5	Number of duty bearers and rights holders sensitised about the laws and policies affecting service up take for PWUIDs	500	260	52%
Themati	c area 5: Re	source Mobilisation	•		
	5.1	Number of new projects secured	15	6	40%
Themati	c area 6: Pr	ogram Monitoring and Evaluation	•		
	6.1	Number of M&E systems adopted	5	2	40%

FACTORS THAT EXPLAIN UHRN'S PERFORMANCE IN FINANCIAL YEAR 2019

- UHRN's continued engagement with the Anti-Narcotics police department in Uganda led to increased referrals of the arrested PWIUDs to UHRN for further management as opposed to arrest and detain.
- The creation of a unified movement building of people who use drugs across the country contributed to mobilization of people who use drugs for services and advanced advocacy for essential services for people who use drugs.
- Available funding from donors has enabled UHRN's implementation of various programs that have supported increased access to essential HIV services to people who inject drugs in Uganda, strengthened UHRN's secretariat and build a strong movement of PWUDs communities and has fronted grass root CBOs in advocating for harm reduction and human rights programming in Uganda.

Lessons Learnt

- Strengthening UHRN membership provided a platform for acceleration of people who use drugs movement building agenda and advocacy for essential harm reduction services for people who use drugs.
- The sharing of needles and syringes that puts people who inject drugs at a high risk of transmitting and contracting HIV and hepatitis C can effectively be reduced if the needle and syringe program is operationalized.
- Continuous capacity building of the harm reduction community based organizations is vital for sustainability of harm reduction activities sustaining the meaningful involvement and participation of PWUID community through their community groups.
- The use of tailored Information Education and Communication (IEC) materials is critical for encouraging healthy seeking behaviors including HCT services among the PWUIDs.
- The introduction of a drop in center play an important role in accelerating HIV prevention, treatment, Care and other services among PWID.

Challenges

- There are no standard operating procedures for the implementation of harm reduction programs in Uganda and this affected the implementation of essential programs such as NSP and MAT.
- Limited coverage of harm reduction services in Uganda; the services offered by UHRN are limited to few districts of Uganda yet drug use is a national issue.
- The available public hospitals in Uganda do not have functional drug units to cater for management of drug use cases.
- Most up country district police officers, have limited knowledge on harm reduction and the rights of people who use drugs. As a result, persistent arrests and extortion of money from drug user community still prevails
- Limited funding and restrictive laws and policies affected the scope of harm reduction program in Uganda, for instance the implementation of NSP only benefited Kampala divisions.

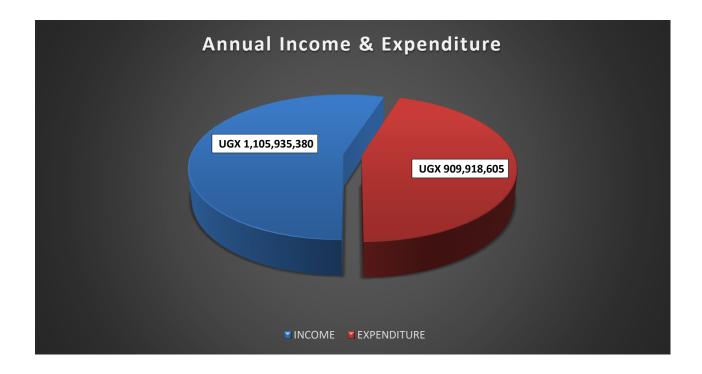
Recommendations

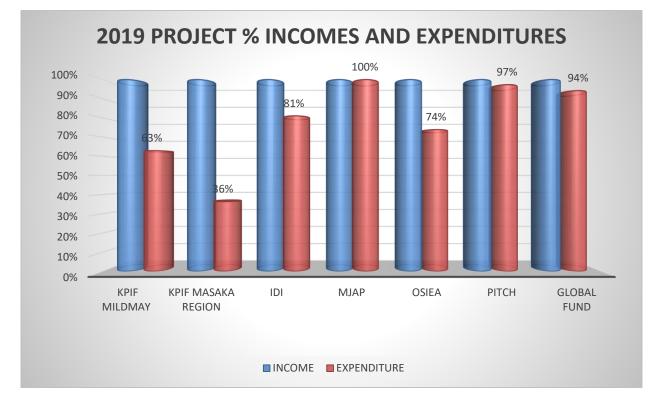
- UHRN and like-minded stakeholders should strengthen the advocacy and lobby from key government stakeholders to embrace harm reduction and respond to the issue of lack of standard operating procedures for effective implementation of harm reduction programs in Uganda.
- A full time Human rights lawyer should be stationed at UHRN Secretariat to reduce on the delays in responding to the arrests of drug users since most of them are taken to prison because of delayed response from the legal partners. In addition to that, UHRN should increase on the number of trained paralegals to serve a wider proportion of people who use drugs including documenting and reporting cases of rights violations for people who use drugs.
- UHRN should scale up its engagement in terms of sensitization meetings with up country police officers to increase their knowledge on harm reduction, rights of people who use drugs and this has led to the persisted arrests and continuous extortion of money from drug user community.
- UHRN should increase its fundraising strategy to fill the gap of limited funding that affects the scope of harm reduction interventions in Uganda.

- The year 2019 should focus on a comprehensive service delivery package to increase reach and coverage for health needs of people who use drugs. This is because there is a high demand for different services including; PrEP, FP, PEP, OST, VMMC, EMTCT and NSP among PWUIDs.
- UHRN should scale up awareness and sensitization engagements to the families of people who use drugs and extend the intervention in the schools since many school going students are grappling with drug use.
- The police recommended to engage other arms of government such as Justice, Law and Order Sector (JLOS) that include the lawyers, prisoner department, judges and law enforcement.
- Opinion leaders recommended UHRN to consider broad education through media such as TV and radio for massive education on drug use and health across the country.

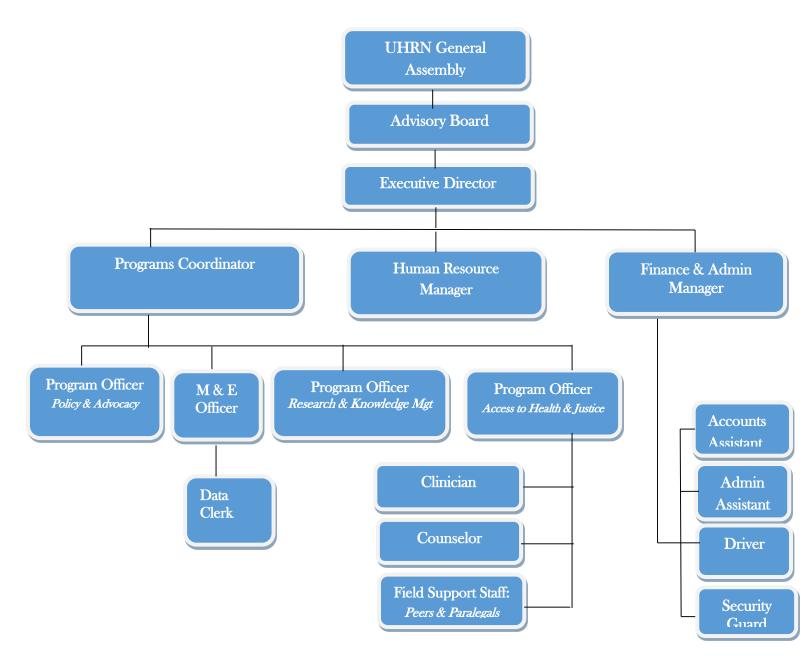
UHRN PLAN FOR 2020

- 1. Scale up PWUIDS community service delivery access points to enhance access to harm reduction interventions
- 2. Strengthen UHRN strategic partnerships
- Scale up establishment of three (3) UHRN regional offices in Mbale, Gulu and Mbarara
- 4. Conduct Geo-mapping and profiling PWUID hotspots in the 40 operational districts of UHRN.
- 5. Institutional and Movement building for UHRN supporting UHRN coordination, strengthen sub granting function and strengthen capacity building of harm reduction internships for harm reduction trainees and network members for harm reduction grassroots CBOs and community advocates, annual harm reduction inductions TOT program
- 6. Reviving of the NSP
- 7. Mainstream issues of gender issues into harm reduction programming





ANNEX 1: UHRN GOVERNANCE AND MANAGEMENT STRUCTURE



ANNEX 2: LIST OF PWUID HOTSPOTS

UHRN PUD hotspot di	rectory in the 5 1	nunicipal divisions of Kampala Capital City A	
		TOTAL # OF HOT SPOTS	84
		of Hot spots reached With HTS outreaches	8
Division	No	Hotspot ID	Drug user category
	1	Jajjasseka - Kisenyi	PWID and PWUD
	2	Washing Bay - Rubaga Road	PWID and PWUD
	3	Muzenkwiriri - BAKULI	PWID and PWUD
	4	Kidansolo - MAKERERE KIVULU	PWID and PWUD
	5	Mama Shakirah - Kisenyi	PWID and PWUD
Central division	6	Team Kamooli - Kisenyi	PWID and PWUD
	7	Mukakajjo -Kisenyi Kiganda Zone	PWID and PWUD
	8	Buwanika - Kisenyi Behind Blue Room	PWID and PWUD
	9	Kyabakadde - Kisenyi	PWID and PWUD
	10	Soweeto - Owino	PWID and PWUD
	11	Kapaipo - Old Taxi Park	PWID and PWUD
	12	Arua Park	PWID and PWUD
	13	Jugura - Kisenyi	PWID and PWUD
	14	Kalituusi - Kivulu	PWID and PWUD
	15	Firebase - Kamokya	PWID and PWUD
	16	Kumbuga - Kamokya	PWID and PWUD
	17	Kisementi - Kamokya	PWID and PWUD
	18	Fat Boyz - Kamokya	PWID and PWUD
	19	Kaseblanca - Kamokya	PWID and PWUD
	20	Just Kicking Sports Bar - Kamokya	PWID and PWUD
	20	Just Ricking Sports Dai - Ramokya	
	1	D13 - Ndeeba	PWID and PWUD
	2	Ku Water - Nateete	PWID and PWUD
	3	Ku water - Nateete Kukasaawe - Nateete	PWID and PWUD
	4	Kampfire - Nateete	PWID and PWUD
	5	Bad zone Mukigaga - Nateete	PWID and PWUD
Rubaga Division	6	Kurailway - Nateete	PWID and PWUD
Kubaga Division	7	Soweeto - Nateete	PWID and PWUD
	8	Ku Knockout - Nateete	PWID and PWUD
	9	Ku Park - Nateete	PWID and PWUD
	10	Kandahar - Nateete	PWID and PWUD
	11	Mabiito - Nateete	PWID and PWUD
	12	Ku Washingbay - Mutundwe	PWID and PWUD
	13	Ku Railway - Ndeeba	PWID and PWUD
	14	Suzzana_Nakulabye	PWID and PWUD
	15	Ku Washing Bay - Nalukolongo	PWID and PWUD
	16	Kawidda - Nakulabye	PWID and PWUD
	17	Kumbuzzi - Busega	PWID and PWUD
	18	Ku Mbuzzi - Ndeeba	PWID and PWUD
	1	Kimombasa - BWAISE	PWID and PWUD
	2	Happy Street - Kanyaya	PWID and PWUD
	3	Water House - Kalerwe	PWID and PWUD
	4	Muvule - Mpererwe	PWID and PWUD
Kawempe Division	5	Kulufula - Kalerwe	PWID and PWUD
-	6	Kukasaawe - Katanga	PWID and PWUD
	7	Mukatoogo - Bwaise	PWID and PWUD
	8	Kamalimali - Bwaise	PWID and PWUD
	9	Angola - Bwaise Behind Tick Hotel	PWID and PWUD

	10	Mukafunda - Kawempe	PWID and PWUD
	10	Jobless Billionaire - Kalerwe	PWID and PWUD
	12	Bengazi - Kawempe Ku Taanu	PWID and PWUD
	12	Kisweera - Kate Farao Kawempe	PWID and PWUD
	13	Blood - Katooke	PWID and PWUD
	14	Kasasiro - Kiteezi	PWID and PWUD
	15	Mangere - Kawempe Mbogo	PWID and PWUD
	10	Kidansolo - Bwaise	PWID and PWUD
	17	Kidalisolo - Dwalse	P w ID and P w UD
	1	Kataba - Kabalagaga	PWID - PWUD
	2	Dancers - Kibuye	PWID - PWUD
	3	Dido - Kubuye	PWID - PWUD
	4	Kurailway - Katwe	PWID - PWUD
	5		
	-	Munkere - Kibuye	PWID - PWUD
-	6	Kukasawe - Bunga	PWID - PWUD
Makindye Division	7	Muyenga	PWID - PWUD
Making Division	8	Kupark - Munyonyo	PWID - PWUD
	9	Cavish - Nsambya	PWID - PWUD
	10	Forest Bar - Behind KIU	PWID - PWUD
	11	Kiyembe - Kasanga	PWID - PWUD
	12	Ggabakumazzi	PWID - PWUD
	13	Reggae Bar - Kabalagala	PWID - PWUD
	14	Adis Bar - Kabalagala	PWID - PWUD
	15	Mukiyembe - Kansanga	PWID - PWUD
	16	Ghetto Soldiers - Kabalagala	PWID - PWUD
	17	Beiruti - Kabalagala	PWID - PWUD
	1	Stage 7 - Luzira	PWID - PWUD
	2	PB - Portbell landing site	PWID - PWUD
	3	Kimana_Zone - Mbuya Centre Zone	PWID - PWUD
	4	B13 - Luzira	PWID - PWUD
Nakawa Division	5	Kinawattaka Ku Railway	PWID - PWUD
	6	Gaetano - Nakawa	PWID - PWUD
	7	Kiziba- Nakawa	PWID - PWUD
	8	Sky lounge - Nakawa	PWID - PWUD
	9	Oleloz Irish pub - Nakawa	PWID - PWUD
	10	Ranchon - Nakawa	PWID - PWUD
	11	Wind wink - Nakawa	PWID - PWUD
	12	Just kicking sports bar - Nakawa	PWID - PWUD

Our Partners



UGANDA HARM REDUCTION NETWORK (UHRN)



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