

UGANDA HARM REDUCTION NETWORK (UHRN)

ANNUAL REPORT 2018

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ABBREVIATIONS AND ACRONYMS

AGYW Adolescent Girls and Young Women

AIDS Acquired immunodeficiency Syndrome

ART Antiretroviral Therapy

CSOs Civil Society Organisations

HEPs Hepatitis

HIV Human Immune Virus

HRI Harm Reduction Intervention

MAT Methadone Assisted Therapy

NSP Needle and Syringe Program

OCA Organisation Capacity Assessment

OSIEA Open Society Initiative for Eastern Africa

OST Opioid Substitution Therapy

PEPFAR Presidents Emergency Plan for AIDS Relief

PITCH Partnership to Inspire Transform and Connect the HIV response

PWUD People who use drugs

SMC Safe Male Circumcision

TB Tuberculosis

UAC Uganda AIDS Commission

UHRN Uganda Harm Reduction Network

UNAIDs United Nations AIDS Development program

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About UHRN

Uganda Harm Reduction Network (UHRN) is a youth led drug user national network established in 2008 and registered under Reg. No. 181733 to respond to the drug use crisis in Uganda. The network works to advocate for practical interventions aimed at supporting and addressing issues of people who use drugs (PWUD). The network also seeks to provide a national platform for health and policy programs that promote good practices and advocate for a supportive environment for the adoption, implementation and expansion of harm reduction programs for people who use drugs (PWUD) in Uganda.

Vision

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

To improve the health, human rights and socio-economic well-being of PWUD 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.

Our core thematic areas

Strengthening UHRN for sustainability

UHRN to be a "National Hub" of capacity enhancement for PWUIDs led and serving organisations.

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.

7

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 2018.

Through the Capacity enhancement and movement building program, UHRN provided organization capacity development to selected grass root network members on 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, benefited from the Tot

mentorship program in HIV and Human Rights advocacy, participated in the international and advocacy spaces such as the 22nd International AIDS Conference in Amsterdam, supported PWUD community advocates to train in comprehensive introduction to participatory photography for advocacy, supported staff to attend the harm reduction academy; a global learning dialogue and skills building course run by Alliance of Public Health Ukraine, established collaboration with research institutes and universities for students internship placements.

Under UHRN Policy and Advocacy program, UHRN commemorated key national and international calendar days in collaboration with different stakeholders at regional, national and international level. These included; 26^{th} /June support don't punish campaign, the 28^{th} September safe abortion campaign, the 16 days of activism, 1^{st} December World AIDS day celebration, commemorate the human rights day 10^{th} December 2018, the National HIV Prevention Symposium organised by Ministry of Health/UAC and International AIDS Conference 2018 in Amsterdam.

The Research and Knowledge management area involved participation in the bio-behavioral studies for people who inject drugs in Iganga, Mubende and Arua aimed at estimating the number of people who inject drugs, participation in the drug policy review in Uganda hosted at MoH as a joint effort between the MoH, Ministry of Internal Affairs and CSOs and participation in the development of advocacy messages for key population including people who use and inject drugs.

Under the access to health and justice area, UHRN delivered 17 HTS community outreaches within the KCCA municipal divisions of Kampala, targeting 497 PWIDs. UHRN demonstrated the re-known lifesaving Needle and Syringe Program (NSP) where 561 NSP kits (Standard packages of clean injecting equipment) were procured and delivered to 120 PWID. A total number of 128 cases were received at UHRN for legal redress, and of the 128 cases received 55 were completed and 73 remained pending. And of the 128 cases received 107 were male and 21 were female.

UHRN 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

MESSAGE FROM THE BOARD CHAIRPERSON

I am pleased to introduce to you the 2018 Annual report for Uganda Harm Reduction Network (UHRN). For the year 2018, 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 15 to 27 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. 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 prevalence of high school drop-outs, uncalled for teenager pregnancies and unsafe abortions among adolescent and young women using drugs and engaged in sex work is on the rise. These vulnerable young key populations often suffer abuse in their own families, stigma from the community and this increases their vulnerability and risk perception.

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 since the major fund (HIV and Harm Reduction regional project was closing). The second one was to review UHRN strategic plan and to revise and update UHRN governance structure.

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

Hope Birungi

Board Chairperson

1. INTRODUCTION

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

1.1 THEMATIC AREAS

1.1.1 Thematic area 1: Capacity Enhancement and movement building

UHRN has strengthened the capacity of grass root drug led and serving CBOs to organise and champion harm reduction advocacy agenda. This is reflected by the growth of her membership from 20 members in 2017 to 26 in 2018.

Provided organization capacity development to selected network members on organizational leadership, resource mobilisation, M&E, financial management advocacy research and documentation. Organization capacity development provided to UHRN member organizations in Mbale, Wakiso, Mbarara, Gulu, Kampala, Mubende, Iganga, Tororo, Busia and Arua.

Supported 50grass root PWUD harm reduction community advocates to participate in key advocacy spaces and exchange learning fore to ably strengthen their advocacy capacity to engage and demand for PWUD and gender focused intervention in SRH, HIV and harm reduction programming and policy development in Uganda.

Conducted 18 awareness raising sessions to equip service providers with knowledge to ably

embrace and promote efforts to roll out NSP and the delivery of right based SRH and HIV services to PWUDs

With support from OSIEA; UHRN benefited its staff and network members with various trainings and orientations to



equip them with relevant skills. These trainings were in the areas of advocacy, lobbying and movement building for effective advocacy for the health and rights of people who use drugs.

With support from ARASA, UHRN benefited from the ToT mentorship program in HIV and

Human Rights advocacy.

UHRN
staff
during
the ToT
in South
Africa



With support from the PITCH program, UHRN successfully participated in the international and advocacy spaces such as the 22^{nd} International AIDS Conference in Amsterdam, meeting with commission of Anti-narcotics drugs and UNODC engagement with civil society on drugs and crime prevention in Vienna.

In partnership with the International HIV/AIDS Alliance/ PITCH, UHRN supported its 4 PWUD members to train in a 7 days comprehensive introduction to participatory photography for advocacy.

With support from OSIEA, UHRN benefited from the harm reduction academy; a global learning dialogue and skills building course run by Alliance of Public Health Ukraine, established to end AIDS and HEPs among PWID.

UHRN staff during harm reduction academy in Ukraine







UHRN staff during the harm reduction academy

Activity outcomes

- Through UHRN participation in the regional and international spaces UHRN staff developed an in-depth appreciation of the relationship between health and human rights by UHRN staff
- Strengthened the capacity of UHRN staff around current priorities & health trends as they relate to the Sustainable Development Goals (SDGs), Universal Health Coverage (UHC) and Sexual and Reproductive Health (SRH);
- Enhanced skills and competence of UHRN staff to undertake mapping, develop, plan & conduct advocacy to further HIV, TB, sexual reproductive health and rights;
- The program guided staff on how to monitor laws and policies to meaningful engagement of national key influencers, to influence national budgeting and planning;
- Provided update to staff on the latest scientific advancements in HIV and TB prevention and treatment; and
- Provided skills to plan projects, resource mobilisation and grant management skills.

Exchange learning visit to China

With support from Global Fund, UHRN with the Ugandan team including UAC, MoH, and East Africa delegates visited China in an exchange learning visit on the implementation of harm reduction interventions in China. The activity served as evidence based advocacy for harm reduction programming in Uganda.

The Executive Director **UHRN** and the Ugandan delegates (UAC, MoH and East African delegates in China on exchange learning visit in China

The 5th Annual meeting of the African Regional Judges` forum

With support from UNDP regional office, UHRN attended the 5th Annual meeting of the

African Regional Judges` forum on HIV, Human Rights and the law that was rganised in Johannesburg in South Africa.

The Executive
Director of UHRN
presenting during
the 5th Annual
meeting of the
African Regional
Judges` forum



Uganda Harm Reduction Annual General Meeting

UHRN organised its Annual General Meeting with its member organisations and partners. The activity assessed the progress of the UHRN program towards its outcomes, it also helped to identify key achievements, lessons learnt recommendations from UHRN program mplementation and discussing program plan for 2019.



Discussed program plan for 2019

- Capacity building of UHRN member organisations in organisation development, governance
- Strengthening UHRN PWUD-DiC with a comprehensive health care package for PWUD
- Developing technical guidelines for prevention and management of health effects related to Drug use and other substances
- Strengthening UHRN as a network and developing a unified movement of people who use drugs in Uganda.
- Strengthening UHRN advocacy strategy for essential harm reduction services for people who use drugs
- Investing in research and knowledge management for drugs and other substance use

1.1.2.1 UHRN's internship program

UHRN under its internship program collaborates with various academic and research institutions within Uganda, East Africa, Africa and international. It receives students for profession growth and development.

This year UHRN received 1 internship student from Colby College in the United States of America. The internee supported the UHRN in drafting capacity building manual on research and advocacy, harm reduction and M&E, community systems strengthening, referral and networking.

1.1.2 Thematic area 2: Policy and Advocacy

UHRN conducted key national and international calendar days in collaboration with different stakeholders at regional, national and international level. Among the advocacy events included;

UHRN through its network members commemorated the support don't punish campaign.



Activity outcomes

Commitment from District health officers to support the operationalization of a drug unit within the regional referral hospital

Some police stations have adjusted their approach from arrest and detain to arrest and refer of PWUID for health services.

PWUIDs have now secured slots to participate in the district health. committees

UHRN in collaboration with ICWEA celebrated the 16 Days of Activism which aims at efforts to end all forms of violence against women. A number of activities included; conducting joint community dialogue in which AGYW were given an opportunity to

present their priorities to the district leadership at the different levels consideration in budgeting planning, implementation and processes in Gulu Municipality in Gulu District.

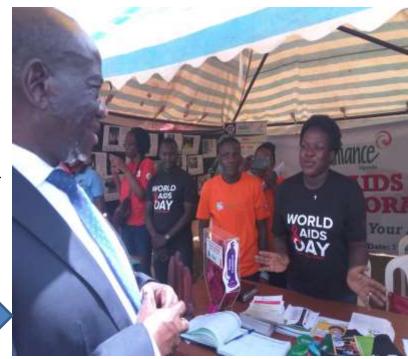
A dialogue by women of today during 1616 days of activism



In collaboration with other partners UHRN celebrated the 1st December World AIDS day

celebration in Manafa
District. Presentations,
exhibitions of key HIV
advocacy campaign materials
were made. UHRN engaged a
number of key stakeholders
during the event including
the Vice President of
Uganda.

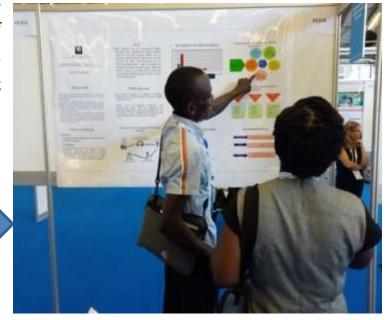
H.E the Vise
President Hon.
Edward
Sekandi at
UHRN stall



UHRN staff attended the International AIDS Conference 2018 organized in Amsterdam. Netherlands that was attended by global leaders, researchers, program implementers and

advocates working together at the unique intersection of science, advocacy and human rights under the "Breaking Barriers Building Bridges".

Research and knowledge management officer presenting a post during the International AIDS conference



UHRN participated in the National HIV Prevention Symposium organised by Ministry of Health/UAC, 3presentations were made both oral and poster presentations and exhibitions



Photo voice for digital photography in advocacy

With support from the Frontline AIDS, UHRN participated in the photo voice activity as advocacy strategy to upport development of social and media skills among UHRN human

rights advocates.

UHRN and other PITCH implementing partners during the photo voice activity

1.1.3 Thematic area 3: Research and Knowledge management

UHRN continued to prioritise research and knowledge management as its core thematic area. During 2018 UHRN engaged in several research studies including; research in drug

use within the refugee's settings in Uganda, operational research and national size estimates.



UHRN
team with
a team
from
UNODC,
US
Embassy,
USINL,

In partnership with Crane Survey, UHRN engaged in bio-behavioral studies for people who inject drugs in Iganga, Mubende and Arua. These studies were aimed at estimating the number of people who inject drugs in those districts.

Activity outcome

A draft size estimates report for PWUID in Iganga, Mubende and Arua developed

UHRN participated in the drug policy review in Uganda hosted at MoH as a joint effort between the MoH, Ministry of Internal Affairs and CSOs to share expert knowledge on palliative care and harm reduction in relation to access to essential medicines with relevant line ministries.

In partnership with Crane Survey participated in designing of health and human rights advocacy messages for key populations in Uganda.

Activity outcome

A draft drug policy review report for Uganda developed

1.1.4Thematic area 4: Access to health and justice services

1.1.4.1 Access to health

UHRN Strengthened and targeted HTS service delivery to PWUD through the DiC and community hotspot based outreaches.

In collaboration with MJAP, UHRN delivered 8 HTS community outreaches within the

KCCA municipal divisions of Kampala. 447 PWIDs tested for HIV, 37 tested positive and successfully initiated on ART.

PWID HTS activities in drug use hotspots



Table 1: HTS conducted by UHRN, 2018

Hot spot	No of people tested	No positive	Referrals to the facility
Kataba-Kabalagala	42	2	Kirudu Hospital
Kimombasa –Bwasie	30	10	ISS-Mulago
Team Kamoli–Kisenyi	21	3	ISS-Mulago
Muzenkwiri-Bakuli	37	2	ISS-Mulago
Kidansolo-Kivulu	32	1	ISS-Mulago
Kimanazone-	22	5	Butabika
MbuyaKinawataka			
Suzanna-Nukulabye	24	0	ISS-Mulago
Kiyembe-Kansanga	19	0	ISS-Mulago
Port Bell-Nakawa	22	1	Butabika
Bugalani-Bwaise	20	1	ISS-Mulago
Kyabakadde-Rubaga Road	28	2	ISS-Mulago
Kiteso-KisenyiKiganda	26	4	ISS- Mulago
Zone			
Upper Port Bell-Nakawa	23	0	Butabika
'ManSource'Kibuye-	28	2	Kirudu Hospital
Makindye			
Blood Brother –Rubaga	25	0	ISS-Mulago
Target- Kivulu Central	23	2	ISS-Mulago
Two-in-One	25	2	ISS-Mulago
KalerweKawempe			

Source: UHRN outreach data, 2018

UHRN demonstrated their-known life-saving Needle and Syringe Program (NSP) in selected hotspots in Kampala and Wakiso through fixed site (UHRN DiC and MARPI) and outreach/backpack model where selected. PWID peers were selected to distribute clean needles and syringes and also collect used injecting equipments through safe disposal

containers. The activity was under the support of HIV and harm reduction global fund.

Procured 561 NSP kits with 2244 pieces of clean needles and syringes to 120 PWIDs (34 female PWIDs and 86 male PWIDs)

UHRN peer at DiC on NSP

Number of referrals made by UHRN in 2018

Referral	Nature of cases	No of cases	Completed	Pending
	referred	referred	.	
	НСТ	07	07	0
15/ 22/	ART	01	01	0
MARPI	PEP	0	0	0
	PREP	02	02	0
	SMC	0	0	0
	NSP	120	120	0
	STI	02	02	0
	ТВ	0	0	0
	HCT	18	18	00
KHCIV	SMC	08	08	00
	STI	01	01	00
	ТВ	00	00	00
	ТВ	01	01	00
KIRUDU	STI	00	00	00
	НСТ	86	86	00
	ART	04	03	01
ISS clinic	ART	21	17	04
	PEP	00	00	00
	STI	06	06	00
	ТВ	07	04	03
	SMC	00	00	00
	НСТ	291	291	00
Butabika health clinic	НСТ	77	77	00
	ART	06	03	03

CTI	04	02	02
311	04	02	02
ТВ	02	00	02
Blackmail	01	01	00
Threatening violence	00	00	00
Assault	02	00	00
Criminal arrest	21	17	04
Eviction	25	25	00
Raids	16	16	00
Addiction mgmt.	13	05	08
	748	713	35
	Blackmail Threatening violence Assault Criminal arrest Eviction Raids	TB 02 Blackmail 01 Threatening 00 violence Assault 02 Criminal arrest 21 Eviction 25 Raids 16 Addiction mgmt. 13	TB 02 00 Blackmail 01 01 Threatening violence 00 00 Assault 02 00 Criminal arrest 21 17 Eviction 25 25 Raids 16 16 Addiction mgmt. 13 05 748 713

Source: UHRN Referral and linkage data

1.1.4.2 Access to justice

Under this program UHRN provides legal aid to PWUDs through its partners such as HRAPF and UGANET. Cases are reported and handled by the use of UHRN peers and paralegals. A Total number of 128 cases were received at UHRN and handled by the UHRN, Police, Paralegals and HRAPF. Of the 128 cases received 55 were completed and 73 remained pending. And of the 128 cases received 107 were male and 21 were female.

The Table Below Shows the Nature of Drug User Cases Received and Handled In 2018

NO	Nature of case	No of Drug Users Cases Received	No of Cases Completed	Pending	Handled By
1	Gender Based Violence	3	2	1	UHRN
2	Theft	15	3	12	UHRN & Police
3	Rape	2	0	2	UHRN, Police & HRAPF
4	Drug Use	60	41	19	UHRN, Police& HRAPF
5	Eviction	2	1	1	UHRN &Local Leaders
6	Family Neglect	30	2	28	UHRN &Police Family Division

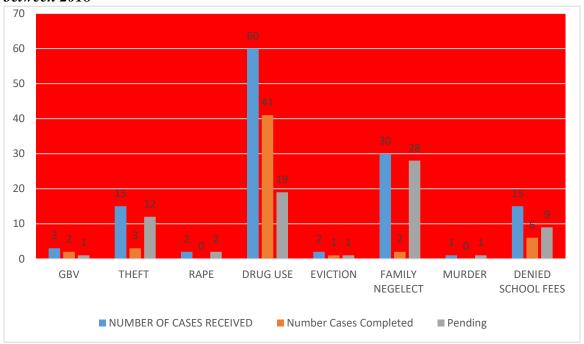
7	Murder	1	0	1	UHRN, Police& HRAPF
8	Denied School Fees	15	6	9	UHRN

Source: UHRN data case management, 2018

The table above indicate the drug user cases experienced in the community ranging from human rights violation inform of arrests, sexual gender based violence, and systemic dysfunction.

UHRN handled some of the cases but a few cases remained pending due to factors such as delayed response from the legal aid institutions and over whelming cases of violation of human rights by the focal persons from collaborating human rights institutions such as HRAPF. All the results of case management for violation of PWUD human rights are illustrated below;

A Graph Showing the Nature of Drug User Cases Received, Handled and Pending between 2018



Source: UHRN M&E data 2018

UHRN in collaboration with HRAPF conducted orientation training for 10 paralegals to equip and refresh the paralegals with knowledge on case management and involved areas of human rights, law, documentation and reporting cases of human rights violation for people who use drugs in Uganda.

1.1.5Thematic area 5: Resource Mobilization

During 2018, UHRN secured foreign funding to execute HIV and harm reduction activities in Uganda. Maintained and worked effectively with old funders/ donors that included Global Fund, OSIEA and PITCH. Towards the end of the year, UHRN brought on board MJAP/IDI that funded UHRN PWID Health Testing and Counselling services that were implemented within the divisions of Kampala.

Our main fundraising strategy in the next financial year will include; fundraising through partnerships to tap into domestic resources for health.

1.1.6 Thematic area 6: Monitiroing and Evaluation

To come up with ME report, data was collected using the monitoring tools including case management tools, meeting attendance forms, pre-assessment and post assessment, condom tracking tools, daily record forms. Data was analysed using the Syrex data base management system where field workers entered data in the Syrex app on a smart phone or a tablet and the data is automatically synchronised with all mobile devices in the field.

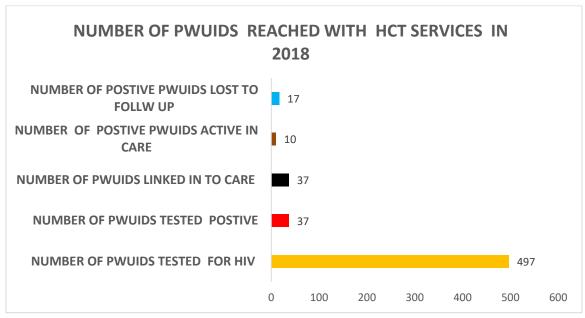
The Syrex app scans the client code finger print, to identify clients and record information quickly. Services are simply selected on the screen with a click allowing field workers to spend more time interacting with clients and providing services.

Below is a summary of the M&E report 2018

UHRN SUMMARY REPORT 2018				
Number of clients reached during the NSP demonstration	120			
Number of needle and syringes distributed	2244			
Number of condoms distributed	100740			
Number of IEC materials distributed	4132			
Number of paralegals trained in human				
rights, reporting and				
documentation	10			
Number of drug user cases received	128			
Number of cases completed	55			
Number of cases pending	73			

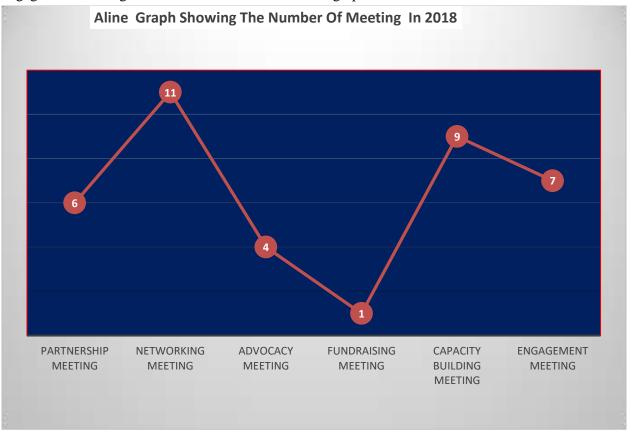
Source: M&E, 2018

UHRN reached a number of PWUDs with HCT services. The indicators that were used to capture the number of PWUDs reached with HCT services included; number of PWUDs tested for HIV, PWUDs tested positive, those linked to care, active in care and positive PWUDs lost to follow up. The results are illustrated in the graph below;



Source: UHRN M&E data 2018

UHRN held a number of strategic meetings including; 6 partnerships meeting, 11 networking meetings, 4 advocacy meetings, 1 fundraising meeting, 9 capacity building meetings and 7 engagement meetings. The results are illustrated in the graph below;



Source: M&E data 2018

1.2 SUMMARY OF ACHIEVEMENTS

UHRN demonstrated the re-known NSP project within the divisions of Kampala. The program distributed clean equipment including; needles, syringes, cotton swabs, tourniquet, sterilized water, disposal bins, spoons. 2244 needles and syringes were distributed to clients and 1434 used needles and syringes were returned.

Commitment from law enforcement officers and health service providers; UHRN received commitment from the law enforcement officers and health service providers during the support don't punish campaign in western Uganda. Stakeholders pledged to come up with a referral network system that will comprise of the law enforcement and health service providers. They also committed to push an agenda to follow up on the establishment and functionality of a drug unit at all health centre IV.

PEPFAR allotted over USD 250,000 for the implementation of harm reduction intervention in Uganda for PWUDs for COP18 at the regional planning meeting in Johannesburg.

1.3 FACTORS THAT EXPLAIN UHRN'S PERFORMANCE IN FY 2018

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 mobilisation of people who use drugs for services and advanced advocacy for essential services for people who use drugs.

Available funding from donors such as; Global fund that supported increased access to essential HIV services to people who inject drugs in Uganda, OSIEA that supported UHRN secretariat and build a strong movement of PWUD communities, CBOs at the forefront in advocating for harm reduction and human rights programming in Uganda and PITCH project whose aim was equal access to HIV related services for KPs in Uganda, equal and full rights for key populations in Uganda. In addition to the major funders, UHRN received activity funding from partners such as MJAP to implement community health outreaches for PWIDs in the divisions of Kampala.

2. 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. In order to achieve full involvement and participation of PWUD community through their community groups, there should be continuous capacity building in leadership, advocacy, reporting and documentation.

Use of IEC materials including T-Shirts, posters and banner with tailored messages was critical in encouraging good seeking behaviours including seeking for HCT services by PWUDs.

The timely introduction of UHRN drop in centre is credited for averting an HIV epidemic among PWID in Kampala as it has led to increased number of PWUDs seeking HIV Counselling and Testing services.

3. CHALLENGES

Lack of drug addiction treatment centers in Uganda to deal with people with drug use disorders

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.

4. 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 PWUDs.

5. UHRN PROGRAM PLAN FOR 2019

Program plan 1: Capacity building of UHRN member organisations in organisation development and governance e.t.c

Program plan 2: Strengthening UHRN PWUD-DiC with a comprehensive health care package for PWUD

Program plan 3: To continue advocating for the developing technical guidelines for prevention and management of health effects related to Drug use and other substances

Program plan 4: Strengthening UHRN as a network and developing a unified movement of grass root member organisations for people who use drugs in Uganda.

Program plan 5: Strengthening UHRN advocacy strategy for essential harm reduction services for people who use drugs

Program plan 6: Investing in research and knowledge management for drugs and other substance use

6. ANNEXES

6.1 **UHRN**'S RESULT FRAMEWORK

Intervention	Indicators	Outcomes/Results				
Access to health an	Access to health and legal justice					
Conduct HTS outreaches	Number of drug users reached through community outreach programs Number of outreaches conducted Number of condoms and lubricants distributed Number of clean needles and syringes distributed Number of positive PWUDs link to care Number of positive PWUDs lost to follow up	Improved access, coverage and uptake of quality HIV/TB/SRHR/Hepatitis services and legal justice among PWUD in Uganda.				
Provide legal support to PWUDS in conflict with the law	# of human rights violation cases reported and managed.					
Policy and advocac	y					
Conduct high level meetings	# of high level meetings # of opinion leaders engaged # of policy briefs	Enabling environment for conducting harm reduction program,				
Commemoration of advocacy days(support don't punish campaign)	# advocacy days commemorated Commitment made by key influential persons	Enabling environment for conducting harm reduction program.				
Research and know	ledge management					
Conduct research	# of research studied conducted	Evidenced based advocacy.				
Capacity enhancem	ent and movement building					
Provide mentorship to network UHRN members	#of mentorship trainings conducted # of uhrn network members mentored	A vibrant and unified community of PWUDs to advocated for harm reduction interventions.				
Monitoring and eval	Monitoring and evaluation					
Manage organization data (Data collection, Data analysis & reporting)	Data management systems available # of data collection tools developed # of M&E reports developed	Strengthened monitoring systems.				
Conducted Monitoring visits	# of monitoring visits conducted	Empowered community to deliver to their mandate				

Source: M&E, 2018

6.2 UHRN LIST OF DONORS 2018

No	Donor	Project title	Goal	Amount
1	Global	Uganda Key Population Costed	To Conduct a situation analysis study	\$20000
	Fund/Most at	extension Project 2015 - 2016	on Drug use and Vulnerability to	
	Risk Populations		HIV/AIDS among PWUDs in	
	Network (Uganda. Case study: Busia, Tororo-	
	MARPS		Malaba & Mbale districts (2015)	
	NETWORK)			
2	Global	Increase access to essential	HIV & Harm Reduction Targeting	\$ 463,460
	Fund/KANCO/C	HIV and harm reduction	PWIDs in Uganda (Oct 2016 – Dec	USD
	HAU	services for PWIDs in East	2018)	
		Africa		
3	KANCO	Building Capacity of Young	Raising awareness on high-risk	\$ 20000
		People/Students in Universities	behaviors associated with	
		to appreciate the High-Risk	Alcohol/drug use and their	
		Behaviors Associated with	vulnerabilities to HIV among young	
		Alcohol/Drug Use and their	people/students at the Universities in	
		Vulnerabilities to HIV In	Uganda.	
		Uganda. (Oct 2014 – Oct 2015)		
4	FRONTLINE	Partnership to Inspire	Promote attitude change among policy	200,878
	AIDS (FLA)	Transform and Connect the	makers and other duty bearers to	USD
		HIV response (PITCH), (Oct	embrace efforts to address PWIDs	
		2016 – Dec 2020)	stigma and discrimination and Equal	
			access to comprehensive HIV/SRHRs	
			related services for PWUIDs in	
			Uganda.	
5	OSIEA	Institutional Strengthening and	Building the Harm Reduction	160,000
		Building a strong movement to	Movement and Response Mechanism	USD
		generate a response		
		mechanisms to Harm		
		Reduction and Human Rights		
		issues that affect PWUIDs in		
		Uganda, (2017 – 2020)		

6.3 UHRN GOVERNANCE AND MANAGEMENT STRUCTURE

