People sharing syringes in Kenya face a high risk of HIV. So we took action with our partners to launch the country’s first-ever harm reduction services. Now we’ve learnt from our success to take this life-changing model to other countries.
KENYA: STEPS TO A SUCCESSFUL PILOT

ENGAGING COMMUNITIES
To build support for working with people who use drugs, we talked with community leaders and heard their experiences. Together, we held community clean-ups of used needles and syringes.

SPEAKING UP FOR CHANGE
A government crackdown on drugs caused a rise in demand for drugs services like needle and syringe exchanges and opioid substitution treatment (replacing drugs like heroin with less harmful alternatives). So we worked with KANCO (the Kenya AIDS Non-Governmental Organisation Consortium) to urge the Kenyan Ministry of Health to allow people to access these harm reduction services.

TECHNICAL & GOVERNMENT PARTNERS
WHO, UNODC, NASCOP, Ministry of Health, Internews, NACC

PILOTING HARM REDUCTION SERVICES
People were dying so we had to act fast. Before national guidelines were approved we piloted harm reduction services in Nairobi and Mombasa, including needle and syringe exchanges and opioid substitution therapy. Though working quickly, we respected the government’s process at every step.

NATIONAL & COMMUNITY PARTNERS
KANCO, Kenya Red Cross, KeNPUD, TaNPUD, MEWA, NOSET, OMARI, REACHOUT, Teenswatch

FRONLINE AIDS

HELPING SET NATIONAL GUIDELINES
We worked with the World Health Organisation and other partners to help the National AIDS Programme (NASCOP) develop standard operating procedures for running harm reduction services in Kenya.

TECHNICAL & GOVERNMENT PARTNERS
WHO, UNODC, NASCOP, Ministry of Health, Internews, NACC

Making Services Sustainable
In 2016, KANCO led the regional Global Fund advocacy programme for people who use drugs, making Kenya a regional leader in harm reduction programmes. Plus, in 2018 the Kenyan government visited China to learn how they reduced harm in the community. We continue to work with the Ministry of Health to speak up for harm reduction services based in the community, rather than in hospitals and rehabilitation centres.

Scaling Up Services
The national Global Fund programme took over running harm reduction services in Nairobi, Mombasa and the Eastern Region. They aimed to support 90% of people injecting drugs. Meanwhile, our Integrated Harm Reduction programme focused on reaching women who used drugs. This included introducing harm reduction services in new counties like Western and Central Kenya, and helping people follow their HIV medication.

2011
2012
2013
2015
In 2012, people using drugs in Kenya were facing an HIV epidemic. Data showed that 18.3% of male and 44.5% of female users were living with HIV, and made up 3.8% of all new cases.

It’s a global problem – of the 15.6 million people worldwide who inject drugs, nearly one in five live with HIV. Most don’t get the help they need. Fewer than one per cent live in countries with high-coverage harm reduction services, such as needle and syringe exchanges (NSP) and opioid substitution therapy (OST), which involves replacing drugs like heroin with prescribed alternatives.

In Kenya, sharing needles was a big issue. Nearly half (48%) of people who used drugs said they used someone else’s syringe when they last injected. Meanwhile, the stigma around HIV and drugs stopped them getting support.

We knew we could help. That’s why we asked Kenya, along with six other countries, to take part in our Community on Harm Reduction (CAHR) programme, supported by the Netherlands Ministry of Foreign Affairs. From 2011 to 2015 we worked with our partners on the frontline doing research, speaking up for change and introducing vital initiatives. Overall, we supported 8,000 people through essential HIV and harm reduction services.

Almost one in five people in the world who use drugs live with HIV.2

By the end of the programme, research showed that 88% of people who used drugs used a clean needle when they last injected. This simple action stopped HIV spreading.

While the CAHR programme ended in 2015, we’re still on the frontline in Kenya – working alongside our partners on practical ways to keep people safe.

Our work is far from over. We want a future free from AIDS for everyone, everywhere. So by 2020, we aim to launch harm reduction in three new countries, including Ethiopia and Nigeria.

Small-scale pilot projects can produce life-changing results. With governments onboard, we can turn these projects into bigger programmes that support thousands more people. Join us on the frontline to fund our work.

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