

HARM REDUCTION



IN
ARMENIA

HIV transmission routes

1988- SEP 2015

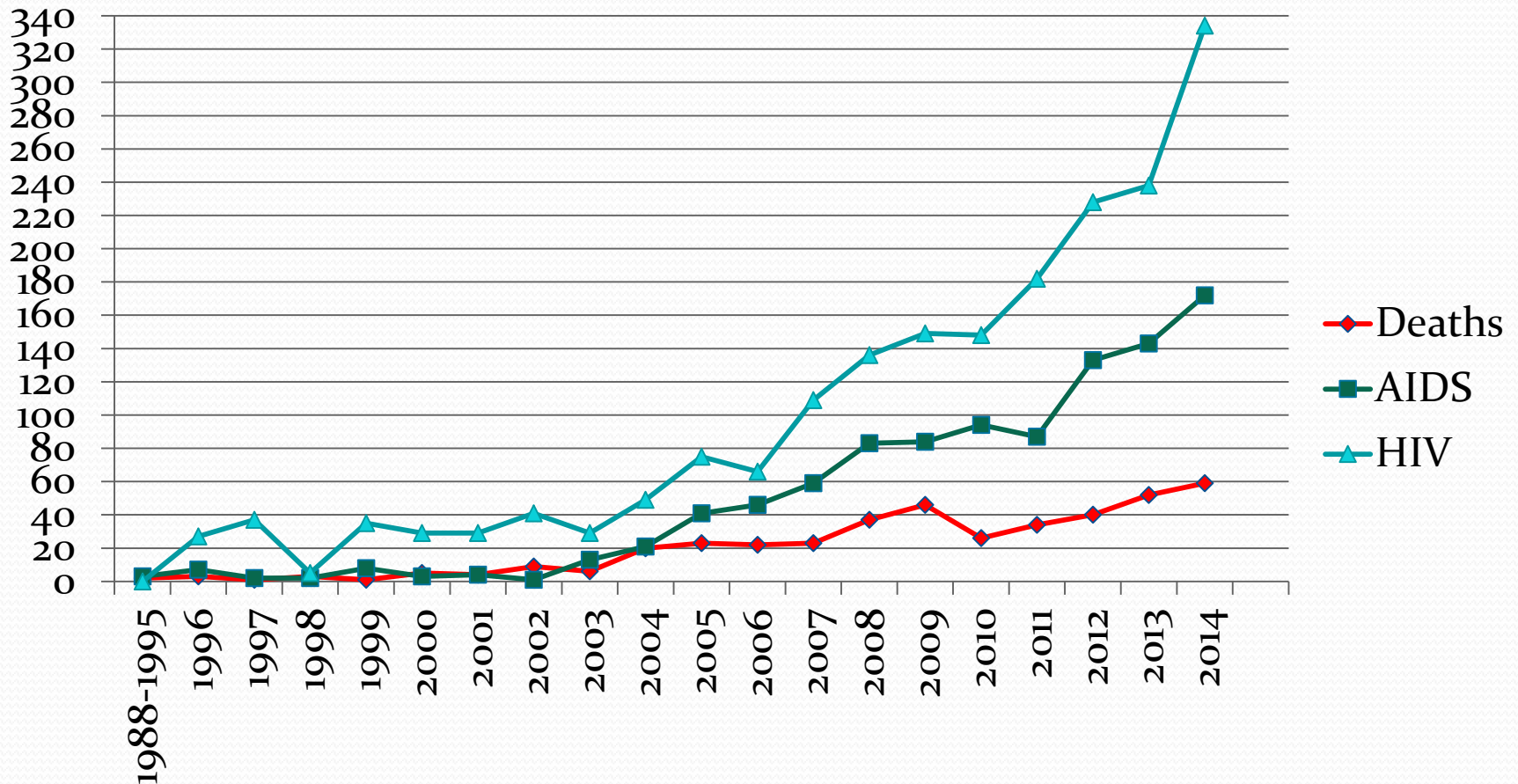
Transmission mode	Percentage
Transmission through heterosexual practices	64.4%
Transmission through injecting drug usage	26.2%
Transmission through homosexual practices	2.7%
Mother-to-child transmission	1.7%
Blood transfusion	0.2%
Unknown	4.9%

From 1988 to 30 September 2015

2171

HIV cases had been registered


Number of new HIV diagnoses, AIDS diagnoses and deaths



Source: Grigoryan S. HIV/AIDS epidemic update, HIV services, Activities in Republic of Armenia.

Needle & Syringe Program (NSP)

- No Legal acts and no governmental funding.
- Governmental institutions do not participate in NSP in any way.
- Only NGOs provide NSP. “AIDS Prevention Education Care” NGO (APEC) with the financial support of the Global Fund.
- NSP operates almost exclusively on an outreach basis.

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- APEC employed 43 outreach workers by 2015. 27 in Yerevan and 16 in other districts.
 - OWs use a coding system to register clients and protect their anonymity.
 - The number of PWID reached as reported by APEC, increased from 1,071 in 2012 to 2,881 in 2013.



In 2013, APEC distributed 512,270 needles/syringes.

- The NGO has a formal agreement with the STI clinic for free HIV and STI testing.
- The number of people who underwent HIV testing and counselling increased from 647 in 2012 to 1983 in 2013 (or 15.6% of the estimated PWID).

Obstacles


- The quality of NSP services is questionable, as it is difficult to observe how OWs provide service in reality.
- Low professional skills of OWs (i.e. lacking awareness of the drugs production and injecting practices)
- There are no fixed locations for the NSPs in the country.


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- The stigmatization and lack of cooperation from the law enforcement sector creates difficulties for a better implementation of NSP

Opioid Substitution Therapy (OST)

- The ministry of Health has approved the National Clinical Guideline for OST with methadone in 2006, however the Republican Narcological Center (RNC) started to implement it in 2009.



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- By January 2015 there were 10 OST sites in Armenia, 7 of them in prisons.
 - The total number of patients on OST in the end of 2014 was 430, of which 131 were in prisons.
 - Between 2009 - 2014 the RNC treated 500 PWID of which only 5 were women.
 - The overall coverage of OST remains very low at 3.4% of the current estimated 12,700 PWID.

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- OST patients who demonstrate stable remission (clean urine tests, employment) or are in difficult physical condition, may come to the clinic three times per week and take methadone for home use. Patients who live 30 - 50 km from Yerevan may also use this privilege.
 - There is no OST duration limit for patients or pressure to leave treatment.

PWID & HIV

- It is estimated that there are around 500 HIV positive PWID in Armenia.
- 26 PLHIV were on OST at the end of 2014.
- PWID must submit HIV and HCV test results before entering OST.

Barriers for PWID to access and stay on OST

- Geographic remoteness of OST sites
- Serious confidentiality issues (Patients names are shared with the police)
- Restrictive inclusion/exclusion criteria for OST
- OST is not included in all prisons

- Low level of integration with HIV, TB and STI care and treatment services.
- Patients do not undergo regular annual screening for HIV, STIs or TB.
- Problems to continue OST if the patient is hospitalized for HIV or TB
 - **For example:** Nurses from the RNC have to deliver methadone on a daily basis



Շնորհակալություն
(Shnorhakalutyun)

Thank you for your
attention