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# SPECIFIC HARM REDUCTION SERVICES FOR WOMEN:

IT'S  
TIME!



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### WOMEN WHO INJECT DRUGS:

- Unknown proportion in the MENA region
- “Hidden” population: injection not socially acceptable for women
- Low uptake of Harm Reduction services



### OPERATIONAL RESEARCH IN 6 COUNTRIES OF THE MENA REGION:

- 57 women interviewed: 32 injecting drugs
- Most used Harm Reduction services: HIV testing and Needle acquisition
- 27 women who inject drugs accessed needles through Harm Reduction services
- Services delivered mostly by male outreach workers
- Limited to non-existent drop in centers/services specific to women
- Only ONE country offers gender sensitive harm reduction services
- Women NEED a complete set of services for better health outcomes



### Women who inject drugs remain more vulnerable and at higher risk than their male counterparts. Compared to males who inject drugs, they experience:

- Higher mortality rates
- Faster progression to drug dependence
- Increased likelihood of injecting related problems
- Increased level of risky injecting and/or sexual behaviors
- Increased rates of HIV



### WHY?

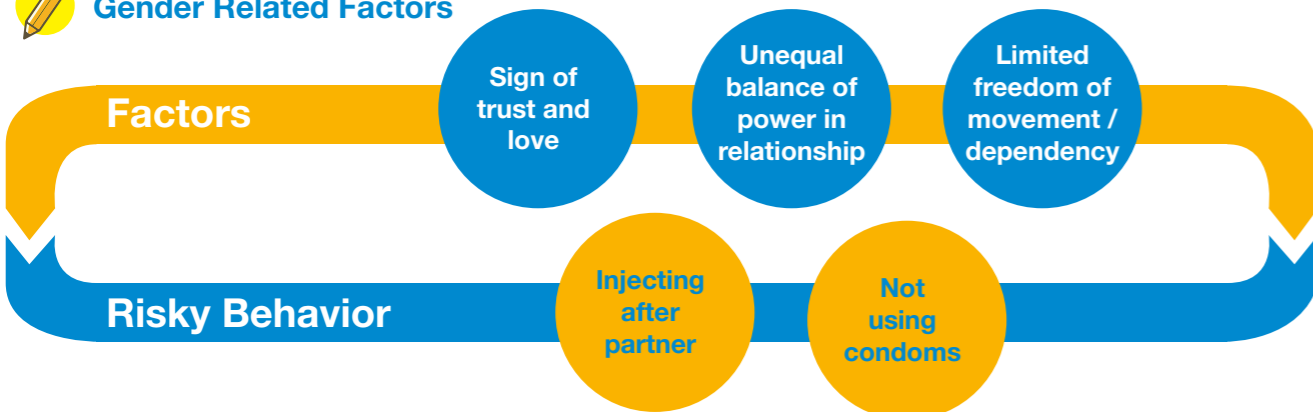
Because social stigma and gender related factors **increase stigma and discrimination** and **encourage risky behaviors** among women who inject drugs!



### Social Stigma



### Gender Related Factors



### ADDED VALUE?

- Improved access of women who inject drugs to life saving services
- Decreased risky behaviors
- Decreased adverse health issues
- SAVED LIVES



**SOCIOCULTURAL VULNERABILITIES**, that are a consequence of drug use among women, further hinder their access to services and compound their health risks.



### Health Risks

	Main Problems	Risky Behaviors
Sexual and reproductive health	- Unwanted pregnancies - Unsafe abortions - Pregnancy complications	- Condom non-use - Contraceptive misuse
Physical health	- Fatigue and physical weakness - Lack of appetite - Sexually Transmitted Infections - Severe vein damage	- Lack of self-care - Excessive use of sleeping pills and/or psychotropic medications - Condom non-use - Unsafe injecting in same area - Needle sharing
Psychological health	- Depression - Anxiety - Stress - Sleeping disorders	- Self-stigma - Suicidal thoughts and/or attempts



### WHAT CAN BE DONE?

**Gender mainstreaming** to integrate the following interventions into harm reduction services:

**Sexual and Reproductive health:** male and female condom distribution, contraceptive distribution, sexual education, pre and post natal care, awareness raising and prevention of unsafe abortion, post-abortion care, STI/HIV testing and care

**Outreach:** sensitivity training, capacity building of female outreach workers for further inclusion into programs, female condom distribution

**General health:** education on safe injection skills, self-care strategies and behaviors, counseling and training on negotiation skills

**Psychological and mental health:** psychological support and counseling; support group sessions; activities promoting self-esteem, confidence, self-worth, assertiveness and negotiation skills; life skills training; psychiatric care

**Violence:** prevention and management of gender based violence; family counseling; training on gender equality and self-defense skills; referral for housing, support and shelter services for survivors

**Legal aid and incarceration:** legal counseling, case management, trainings on rights for beneficiaries and law enforcement agencies, integration of harm reduction services into prisons

**Financial difficulties:** vocational training, support for income generating activities, provision of transportation costs to harm reduction programs

“I don’t get to choose the needle; my partner does it for me.”  
25-year-old woman from Lebanon, 11 years of drug use.

“We can’t go to the hospital as we will be insulted and treated as sinful. They would make us feel guilty.”  
55-year-old woman from Afghanistan, 3 years of drug use.

“My boyfriend was not using a condom, he didn’t like it so I couldn’t argue with him; I didn’t want to lose him.”  
21-year-old woman from Morocco, 8 years of drug use.

“My brothers also deprived me of my share in the house. They kicked me out although it’s my right to be there.”  
25-year-old woman from Morocco, 4 years of drug use.

“If you’re a girl in our society, you will be labeled, no matter what.”  
31-year-old woman from Tunisia, 10 years of drug use.

“Our children can be taken away from us by our husbands or mothers as they say we do not deserve to have kids.”  
27 year old woman from Pakistan, 10 years of drug use.

**It is time! Focus on women’s needs – improve their lives!**