

RECOMMENDATIONS IN THE FACE OF THE COVID-19 CRISIS FROM CIVIL SOCIETY ORGANISATIONS WORKING IN THE FIELD OF DRUGS AND ADDICTIONS IN LATIN AMERICA, THE CARIBBEAN AND SPAIN TO GOVERNMENTS

April 1st, 2020

We, the civil society working in the field of drugs and addictions in Latin America, the Caribbean and Spain, are living an unprecedented reality for the people we serve, our teams and our organisations. Yet, we have redoubled our efforts to adapt our work to the situation posed by COVID-19 and thus we are guaranteeing containment and comprehensive care for people in treatment and for people in situations of extreme social vulnerability, both in Spain and in Latin America and the Caribbean.

However, we need the support and collaboration of the public authorities to guarantee the well-being of the people we work with and of our technical teams, who are on the front line.

From RIOD, UNAD and FLACT we make available to governments the extensive network of organisations that make up our networks, with more than 1,000 associated entities, and we propose eight points that we consider fundamental to confront the pandemic

1. People who use drugs face the same risks as those in the general population with regard to COVID-19; therefore, they should receive the same information and guidance as everyone else in order to reduce the risk of infection. However, we cannot ignore the fact that this population is exposed to additional risks that require the development of specific strategies. Consequently, they must be included among the populations considered at risk due to the pandemic. These risks are linked to:
 - a. Behaviours associated with drug use and the environments in which drug use takes place.
 - b. The high level of physical and psychological co-morbidity experienced by some people who use drugs. It is important to note that people who use drugs often have a high prevalence of respiratory diseases (TB and COPD), cardiovascular diseases, viral diseases (Hepatitis B and C) and HIV, among others. All of them are aggravating factors of the COVID-19 infection.
 - c. The fact that problematic drug use is often more common in marginalised communities. People we work with tend to have a strongly deteriorated social infrastructure, with housing and labour inclusion problems, and highly deteriorated personal, social and emotional support networks.
 - d. This situation is even more acute in children and adolescents from marginalised communities, with severe nutritional problems and great difficulties in accessing health and mental health services.
 - e. The stigmatization that people who use drugs suffer.
 - f. Regarding non-substance addictions and the quarantine measures that are being adopted in most countries, the impact should be

reviewed, and efforts made to minimise the unhealthy use of technologies (gambling, gaming, etc.).

2. We urge States to promote and strengthen the link with civil society organisation working in the field of drugs and addictions, in order to assure the continuity of interventions, due to the great difficulties these groups face in accessing public health systems.
3. The assistance we provide must be considered essential services and our workers must have the protective equipment available in the countries (masks, gloves, glasses and approved diagnostic tests), especially in residential centres (Therapeutic Communities, Assisted Living Facilities, etc.), as well as in Community Intervention and Harm Reduction programmes. It is also necessary to provide protocols for action in the face of the COVID-19 crisis based on the recommendations of international bodies.
4. In Latin America, women, many of whom have family responsibilities, and the poor, unschooled population between the ages of 8 and 18, who have problematic drug consumptions, represent the great challenge for health systems in the face of the COVID-19. They do not have guaranteed access to health and mental health services nor the conditions in their environment to comply with basic prevention measures such as quarantine, social distancing, and hygiene. The health services do not have equipment or facilities capable of caring for these people. Governments must strengthen the intervention mechanisms that civil society organisations are developing to guarantee food, basic health control and family and community prevention measures,
5. Ensure adequate resources and funding for organisations and their teams to allow the delivery of very complex articulated services, such as psychosocial care, health care, social containment, application of COVID-19 detection tests and monitoring of the evolution of the pandemic in excluded and disintegrated communities.
6. The consolidated network of NGOs operating in each country constitutes a formidable network of multiple services directly reaching users, strongly rooted and well-recognised in community contexts, with different levels of complexity in the design of their interventions and work programs.
7. Given the condition of the population at risk, the rights of the imprisoned with problematic drug consumption must be guaranteed, adopting the necessary health prevention measures, such as restrictions on visits, the implementation of measures that favour a good climate of coexistence within the prison, and the medical, psychological and psychiatric care required in this context of high stress. Efforts should be made to provide the necessary measures so that persons who have served at least three quarters of their sentence can complete it at home.
8. Finally, once the health emergency phase is over, socio-economic situations will be faced that will require concrete and appropriate measures to avoid further social suffering; hence, we endorse governments to open communication channels with social organisations to ensure a proper care for



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people with problematic drug consumptions and addictions. Civil society will provide all the knowledge, experience and effort to achieve the best results and assure the rights for everyone.

Signatory organisations:

RIOD – Ibero-American
Network of NGOs Working on
Drugs and Addictions



FLACT – Latin American
Federation of Therapeutic
Communities



UNAD – Addiction Care
Network (Spain)



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Supporting organisations:

Correlation – European Harm
Reduction Network



FONGA – Argentinian NGO
Federation on Drugs
Prevention and Treatment



RAISSS – American Network
for Intervention in Situations
of Social Suffering

