

## ENVIRONMENTS OF SHELTER FOR WOMXN WHO USE DRUGS

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**Background:** Womxn (cis, trans and non-binary gender people) who use drugs and survive multiple situations of violence and vulnerability find it difficult to enter or adhere to social healthcare networks. They are often excluded from specialized services. The lack of optimal alternatives exacerbates social injustice and exclusion. Limiting the possibilities for HIV and HCV screening, referral, treatment, and follow-up.

**Description of model of care/intervention:** Metzineres is the first non-profit cooperative aimed at deploying Environments of Shelter that are exclusive for womxn and which cover the full spectrum of harm reduction. With a holistic and individualized approach connected to the particularities of each womxn. An innovative and daring model of intervention based on human rights and gender mainstreaming which directly affects both the general quality of life and the promotion and maintenance of health. Each consumption is accompanied individually in space, with a nurse specialist in harm reduction, informing about ways of infection and methods of protection to avoid pathologies.

**Effectiveness:** Emphasis is placed on reaching those who experience multiple, simultaneous, and interconnected social variables: drug-related problems (69%), homelessness (68%), migratory experiences (43%), LGBTQ+ (26%), sex work (28%) and/or sex for survival (32%), imprisonment (25%), mental health disorders (47%), and functional diversity (13%).

The importance of the almost 50 daily supports met by Metzineres has shown extraordinary results after five years of implementation. Of the 419 participants of Metzineres, 158 womxn have been screened for HIV, of which 96 have been detected.

**Conclusion and next steps:** Many of the womxn who attend the service live constantly with situations of risk due to lack of syringe exchange services at night, unsanitary consumption practices (injected, smoked and/or snorted), sex work or survival sex without protective measures. We have been able to detect that working together with the womxn involved in information, accompaniment, detection and referral reduces risk situations.