

## **BRIEFING PAPER. GENDER-BASED VIOLENCE AGAINST WOMEN AND PEOPLE OF DIVERSE GENDER IDENTITY AND EXPRESSION WHO USE DRUGS: INTEGRATING PRACTICAL RESPONSES INTO HARM REDUCTION AND HIV PREVENTION AND TREATMENT.**

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### **Background:**

At least 155 countries have passed laws on violence against women, but challenges remain in enforcing these laws, which inhibits women's access to safety and justice. While robust data are scarce, available evidence indicates that women who use drugs experience rates of violence up to 24 times higher than violence towards women in the general population. Punitive laws and policies, harmful gender norms and stereotypes, gender inequalities, marginalization and other barriers to accessing services combine to amplify the risk of HIV transmission among women and people of diverse gender identity and expression who use drugs, and reduce their access to testing and treatment.

### **Methods:**

summary of existing and evidence-based research to inform policy, including definition of policy problem, highlighting of relevant audience, and identification of possible course of actions and recommendations.

### **Results:**

A set of practical examples of approaches to GBV, such as meaningful community involvement; addressing intersectional and multiple risks; service integration; capacity strengthening; safety planning; psychologically informed environments; women-only safe spaces; collaboration and coherence between key partners on violence and harm reduction; data research and analysis; advocacy; challenging harmful gender norms; addressing stigma and discrimination were identified as services relevant to harm reduction. They were recommended to be used as foundations for the design and implementation of services. In addition, a set of evidence-based recommendations on policy and government responses, and on sustaining commitments to international human rights frameworks and mechanisms, was presented in this policy brief.

### **Conclusion:**

This briefing paper raised awareness of the scope and scale of GBV experienced by women and people of diverse gender identity and expression who use drugs, and its connection to the HIV epidemic among them. It highlighted practical responses to violence against these populations that can be adopted by providers of harm reduction and other related services.

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