

BUILDING SOLIDARITY & MUTUAL SUPPORT

**NATIONAL HARM
REDUCTION NETWORKS
IN EUROPE**

Title

Building solidarity & mutual support. National Harm Reduction Networks in Europe

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**Building Solidarity and
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1

INTRODUCTION

Correlation – European Harm Reduction Network (C-EHRN) is a European civil society network and center of expertise in the field of drug use, harm reduction and social inclusion. Established in 2004 in Amsterdam (The Netherlands), the organization works towards an inclusive and just Europe, where people who use drugs and other related marginalized and underserved individuals and communities have equitable and universal access to social and healthcare services without being discriminated against and stigmatized. C-EHRN is hosted by Foundation De Regenboog Groep (FRG) – a nongovernmental low-threshold service organization providing harm reduction services to people who use drugs and other individuals and communities affected by social and health inequalities.

C-EHRN unites a broad variety of actors in the field, from grassroots and community-based organizations, service providers, drug user organizations to research institutes and health service providers.

In crafting a strategy for the upcoming period, and following the needs expressed by its members in an online consultation in 2021, C-EHRN, among others, aims to intensify the support for and cooperation with national harm reduction networks in Europe. This paper aims to explore those needs more in depth.

This background paper was prepared using the review of relevant literature and data from C-EHRN. Its central element, however, was the consultation with twelve C-EHRN members characterized by considerable expertise in networking. The expert consultation included individual interviews via phone calls, online calls, written online exchange, as well as recurring focus group discussions. This process allowed for identification of a multitude of factors influencing the establishment, maintenance, and sustainability of national harm reduction networks, as well as possible areas where the support is most needed.

In the next sections of this paper, the general overview of harm reduction networks in Europe is presented, followed by the discussion on identified barriers and facilitators affecting the establishment and maintenance of the networks. Subsequently, we focus on the needs of the networks and possible roles of the C-EHRN in supporting them.

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NATIONAL HARM REDUCTION NETWORKS IN EUROPE: AN OVERVIEW

For the purposes of this paper, networks are understood as large systems consisting of many similar parts that are connected together to allow movement or communication between or along these parts, or between the individual parts and a control center (Cambridge Dictionary, 2022). In simple terms, we understand a network as constituting a group of individuals and/or organizational actors who are connected with each other in one way or another. The connections between network members can be stronger or weaker, however, in either case, a network's main objective is to create value that benefits all its members. Networks facilitate the creation of a collective knowledge basis and are of a greater asset than individual contributions.

National harm reduction networks are represented in 17 countries - with structures such as mission statements, steering committees, registered members and annual work plans. Roughly two-thirds of the existing networks receive funding for their operation, mostly from national or local authorities. The main activities of these networks are capacity building, advocacy, and networking. They also contribute to strengthen the organizations' commitment in enhancing the linkage between European and national level drug policies (C-EHRN, 2020).

C-EHRN members are part of a wide range of national networks - from highly structured and publicly funded formal ones, such as InfoDrog in Switzerland, to the barely surviving Romanian Harm Reduction Network or the virtually defunct National Association of Harm Reduction Professionals in Hungary.

FORMAL NETWORKS

When members of a network are connected in a formalized way, they constitute a formal network. Formal networks include a range of relations based on contracts or other kind of formally binding agreements and are often created for a specific purpose. Formal networks usually have a process in place for acquiring new members. They usually benefit from some operational funding from public authorities (e.g., government agencies, ministries, local authorities). Membership in a formalized network comes with specific responsibilities and obligations, but also results in profiting from a range of benefits. According to the experts, membership in an esteemed network legitimizes its members' expertise and can facilitate access to venues or people that would otherwise be inaccessible.

INFODROG (SWITZERLAND)

InfoDrog is the Office for the Coordination of Addiction Facilities established by the Federal Office of Public Health (FOPH) in Switzerland. It is a national non-governmental organization operating under the roof of a non-profit foundation. Infodrog supports the FOPH in the development and implementation of the Swiss drug policy. To this end, it manages various expert groups, organizes professional conferences, and implements national projects, which all together contribute to effective coordination of the drug policy field and enhance networking.

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InfoDrog is a prime example of a formal network. This type of network structure implies a culture of shared values and common goals, with an atmosphere of collectivity and mutual assistance, stressing both empowerment and members' growth. This type of network has a strong sense of teamwork where processes are emphasized, and the leaders are financially compensated for their time. According to its members, facilitation, cohesiveness, and participation are key components of InfoDrog's success but, admittedly, the organization's overall focus is on the maintenance of stability.

Networks in the field of harm reduction are quite well established in both the German-speaking and French-speaking parts of Switzerland. Groups of people who work in low-threshold facilities and in the nightlife setting (mainly drug checking services) meet three to four times a year. InfoDrog participates in these meetings to gauge the needs and areas for improvement of coordination required by different services in the country.

"Our main responsibility is to meet the needs of the different harm reduction providers and services. It makes the work of the different services easier because when problems occur that cannot be solved on a regional level, they know who they can turn to. Infodrog acts as a mediator between the political conferences and those services." (Marc Marthaler, InfoDrog).

ROMANIAN HARM REDUCTION NETWORK (ROMANIA)

The formalization of a network does not necessarily guarantee success, stability, or even survival. The Romanian Harm Reduction Network (RHRN) was established in 2002 and formalized as an independent NGO in 2006. Consisting of both institutional (public and non-governmental organizations) and individual members, RHRN "aim[s] to promote the reductions of risks and harms associated with drug use by increasing the degree of communication between partner organizations and improving the quality of services for drug users at the national level" (Alina Bocai, RHRN). Today, however, the network is virtually non-existent. After the harm reduction funding cuts introduced in 2012, only two harm reduction service providers in the country survived and remained active. As a consequence, the relevance and level of activity of RHRN have been drastically subdued.

FEDERATION ADDICTION (FRANCE)

Federation Addiction is a national-level formalized network in France. It was established as a result of a merger between two existing networks, Anitea (National Association of Addiction and Addictology Practitioners) and F3A (Federation of Actors in Alcoholism and Addictology). The Federation evolved in an 800 members-strong group, and brings together professionals in addiction, care, education, prevention, support, and risk reduction. Furthermore, it also engages in local action based on a participatory approach. The Federation is organized into regional unions, governed by a

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steering committee, and has a team of 27 paid staff members. The network's steering committee meets every 2,5 months and is admittedly most focused on policy advocacy. Representatives of the Federation meet with relevant government officials at least once a year and serve as professional consultants on behalf of the network if required. Among others, the Federation Addiction is involved in the National Health Committee, the National Mental Health Council, National Hepatitis Plan Monitoring and Forecasting Committee, and the National HIV/STI Plan Monitoring Committee. It is also active in the addictions working group of the National Agency for Research on AIDS and Hepatitis, representing the rights of people who use drugs, and specialized User Rights Commission.

INFORMAL NETWORKS

In contrast, informal networks tend to have less structured ties and contractual agreements are not involved to govern the relationships. They *“allow members to move in any direction and are more socially structured”* (Joachim Levy, Nouvelle Aube). Arguably, the low-threshold membership of informal structures facilitates the participation of individuals and groups of all backgrounds. On the other hand, a common problem with non-formalized networks is that the coordination and leadership are typically based on voluntary, unpaid work, therefore relying primarily on the motivation and capacity of several individuals. As a consequence, the effectiveness and scope of

activities of informal networks varies considerably. They are also seen by experts as hard to manage due to their imbalanced workflows.

NOUVELLE AUBE (FRANCE)

In France, the association Nouvelle Aube is an interesting example of a self-support organization that has built its own network based on informal, personal connections. The organization began its work in Marseille in 2010 by providing voluntary peer interventions to young adults living in temporary and alternative housing and engaging in multiple risky behaviors. The peer-led character of the organization (which is quite rare in France) is arguably the key factor that facilitated the expansion of the network. Today, Nouvelle Aube is an organization with a board of directors, has over a dozen of paid staff (including peer workers, social workers, and nurses), and provides street work in 26 locations, including several areas known for squatting, and shelters. It also cooperates with various groups of volunteers and maintains stable relations with a range of institutional health care providers and social services. The success of Nouvelle Aube demonstrates that user groups play an important role in addressing public health challenges.

ASSOCIATION OF HARM REDUCTION PROFESSIONAL (HUNGARY)

This informal network type gives its members the flexibility and freedom to grow on their own and conduct their actions in a way that is consistent with their own organizational goals. The leaders in

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such structures are characterized as community leaders driven by intrinsic motivation. They are often recognized for their competence within their specific field. On the other hand, informal networks tend to be more difficult to maintain due to their reliance on individuals' work and capacities. When individuals' capacities or other commitments prevent them from continuing the network-related work with high level of engagement, the network might fall apart. Such situation occurred recently in Hungary where the increasingly hostile political climate and radical cuts in funding resulted in a dramatic crisis of harm reduction services. In turn this reality negatively affected the sustainability of their informal network, Association of Harm Reduction Professionals.

HYBRID NETWORKS

The boundary between formal and informal structures is not always clear. In Europe, there are also various hybrid networks, where the connection system involves a relative balance between different collaboration styles. In such structures, formal and long-term partnerships are less frequent, and less emphasis is placed on strategic alignments. Typically, there is a central organization that focuses on core skill(s) and assumes a leading role in the coordination of functions. Hybrid arrangements are relatively common structures that have been utilized in many different settings.

RISCOS REDUZIDOS EM REDE (PORTUGAL)

The "R3 - Riscos Reduzidos em Rede" was founded in 2004 and is a nationwide network of organizations and individuals working in the field of harm reduction with people who use drugs (PWUD) and sex workers (SW). It is not a formal organization, but rather the result of a broad partnership of organizations and professionals committed to promote Harm Reduction in Portugal. For R3, harm reduction represents a set of policies aimed to respond effectively to challenges linked with drug use and sex work.

In 2004, a European project called REZOLAT documented harm reduction responses in Italy, France, Spain, and Portugal. REZOLAT also aimed to promote networking among projects and professionals in this field of intervention. In November 2004, following the initiative of Prof. Luís Fernandes from University of Porto and Marta Pinto from University of Porto and APDES – Agência Piaget para o Desenvolvimento, the first meeting between harm reduction professionals took place in Portugal. The founding members of the network were organizations working in the northern region of the country: **APDES**, **ADEIMA**¹, **Fundação Filos**, **Associação Norte Vida**, **APPV**², Saúde, Cultura e Vida, **GAF**³, Fundação para o Desenvolvimento Social do Porto, **Centro Social de Paramos**, **APF**⁴ –and **ARSN**⁵. Currently, the network includes 27 projects/organizations and 6 individual members, with representation throughout the country.

1. Associação para o Desenvolvimento Integrado de Matosinhos
2. Associação pelo Prazer de Viver
3. Gabinete de Apoio à Família
4. Associação para o Planeamento Familiar
5. Administração Regional de Saúde do Norte

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The advocacy agenda of the network focuses on drug consumption rooms; safer smoking kits; take-home naloxone; funding models; harm reduction as a permanent service (instead of project-based logic of operation); national coverage of drug checking and party settings interventions; needle and syringe programs in prison settings; peer work; community engagement; and harm reduction for alcohol users.

R3's action is based on the mandatory premise that access to health, namely, to existing social and health services, is a fundamental right. As such, it is considered crucial that every human being is accepted for who they are and no matter of their life trajectory. When this trajectory includes drug use and/or sex work, this fact must be genuinely accepted, and safe spaces must be created in such a way as to promote safer management of drug and alcohol consumption and the adoption of lower risk sexual practices. Furthermore, R3 facilitates access and encourages engagement with other social and health and services and programs. Networking, as well as monitoring and evaluation of interventions, are considered pillars in harm reduction work.

Crescer is one of the members of the R3 network, and has been providing direct, low-threshold harm reduction services since 2001. Crescer supports R3 in identifying network priorities on an ad-hoc basis, seeking out partners who are most appropriate and capable of delivering a specific result.

The primary goals of the network include sharing of experiences and best practices between harm reduction actors; promoting discussion

and *advocacy* within health and social policies, particularly drug and sex work policies; producing knowledge on harm reduction interventions in the Portuguese context; promoting human rights and citizenship of PWUD, SW and other vulnerable groups; and raising community awareness on harm reduction. To achieve these aims, the network organizes monthly meetings dedicated specifically to review the goals and to monitor the progress, thus ensuring that the needs of service users and providers are considered in political decisions.

To be able to actively participate in the networks' activities, each member designates a person responsible for representing the organization and executing network-related tasks. Each organization covers the payment of the staff investing part of their time in the network-related tasks and covers other costs such as travel to meetings. The only formal relationships existing in the network are those constituted with public entities, such as city halls.

Currently, Crescer also oversees the communication channels of the network where the exchange of information between different cities takes place. The network utilizes group chats and email lists to share time-sensitive messages and keep the relationships alive via personal visits. The person responsible for coordinating the network meetings must carve the time for network tasks from their daily work time. Because of that, the network-related tasks rotate among members to share the responsibilities equitably.

The maintenance of hybrid networks seems to be somewhat easier in countries where there is

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a tradition of collaboration and communication. In Portugal, there are many local informal groups, as well as semi-formalized national-level groups focusing on specific issues. However, due to informal workflows and loose requirements for membership, hybrid networks face a specific set of challenges.

*“When a new group is setting up, the beginnings are always very hard. It takes time to establish a flow with them and their commitment levels vary. So, sometimes new people bring fresh energy and [are really useful], but sometimes [a new member] is counterproductive to everything that progressed [so] far”
(Andreia Alves, Crescer).*

In conclusion, informal networks differ strongly from formal networks in several ways. Most significantly, informal networks differ in their structures, foundations, accessibility, and in their boundaries. In either case, several unique benefits, such as inspiration for navigating difficult policies, know-how exchange, or “*codifying problems and solutions*” (Marios Atzemis, Positive Voice) have been highlighted by experts as important added value provided by networks. The following section will discuss that in more detail.

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**THE (ADDED) VALUE OF
NETWORKS**

According to literature, a network is a collection of individual actors, with a distinct identity, fostering specialization as well as opportunities for learning and exploration (Kogut, 2006). This constitutes the networks' core value. Importantly, a range of additional benefits are associated with the existence of networks involving many stakeholders in the harm reduction field ranging from service providers to service users, to local communities and the general public, to decision makers. In this section, these opportunities and benefits are considered.

According to the experts, the main value that harm reduction networks offer for service provider members lies in their ability to engage with other providers. In essence, networks function as a platform for connection, a channel of communication where actors in the field of harm reduction have the possibility to exchange ideas, best practices and share trends in real-time. Networks also amplify the voices of people involved in harm reduction and empower them for advocacy. Some national networks also provide technical support, and platforms to facilitate cooperation in service delivery whilst acting as an intermediate between the ground-level operations and decision makers.

The main identified added value provided by networks is connection. Simply by connecting colleagues with more expertise, experience and knowledge that offers valuable guidance, national harm reduction networks are able to support organizations in their early years. Continuous open dialogue about the changing realities of drug markets, consumption habits and possible

infections or risky behavior contribute to the delivery of higher quality services that are better tailored to the needs of people who use drugs.

Local communities, neighborhoods and the general public can benefit from the existence of harm reduction networks in the sense that better connected stakeholders are able to provide better services. Since drug use and the presence of people who use drugs on the streets are often viewed with concern by local communities, local service networks can be an acceptable interface for civilians to express their worries, wishes and inform themselves about the services rather than approaching individuals or the authorities. For example, if drug consumption sites are integrated in networks, a network could also engage neighbors and provide the meeting spaces that allow for interaction. Therefore, connection between local communities and service users can be facilitated through a network directly contributing to de-escalate emerging challenging situations and hence promoting the resolution of conflict in a supportive environment. In the long run, enhancing communication can also contribute to reduce stigma.

Networks also typically have a good overview of their field, active actors, their skills and main interests. They are therefore perfectly positioned to identify experts, build bridges among stakeholders and set up groups for specific projects. These specific projects can range from data collection and analysis, to advocacy, to the establishment of scientific committees and interest groups, to cooperation in service provision. Networks can also alleviate some administrative difficulties

characteristic of work in the nonprofit sector.

Finally, the value of national harm reduction networks for decision makers lies in their ability to disseminate information from the field. Grassroots initiatives and service providers operate in a significantly different reality than people in decision-making positions, and networks can effectively serve as an intermediate between the two levels. Serving communities and individuals who use drugs requires a different set of skills than engaging with decision makers. Usually, the leaders or representatives of networks are better equipped to navigate the formalities and codes of conduct that are essential in accessing spaces of decision-making.

ASSOCIATION OF PROVIDERS OF ADDICTION SERVICE (CZECHIA)

In Czechia, the Association of Providers of Addiction Services (APAS) is an umbrella organization that brings together a variety of specialized service providers in the field of drug use and coordinates specialized expert groups. The network has a formalized governance mechanisms and structure, and anyone willing to sign the membership agreement can voluntarily join it. APAS organizes meetings on a regular basis (sometimes only for a particular expert group), which before Covid-19 used to be mainly in person. However, after the introduction of nation-wide lockdown measures, the meetings moved online and “[online consultations] became the new norm because it is easier for people to join from

all places around the country, not just Prague” (David Pesek, Sananim). APAS’s Harm Reduction Section prioritizes drug policy, with their meetings mostly focused on discussing progress in national and international policy and measures to align advocacy goals and messages. The results of these meetings inform APAS’s activities as co-chair of the National Drug Policy Forum advising the Governmental Council for Drug Policy.

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**OPERATING
NATIONAL HARM
REDUCTION
NETWORKS**

4. Operating National Harm Reduction Networks

Bringing together stakeholders on the national scene of harm reduction is a challenging task, especially in contexts where governments do not support harm reduction in general. It requires commitment, trust, effective communication, adequate resources and a supportive environment. These key factors, identified by experts and supported by literature, are discussed in the next section.

KEY FACTORS IN ESTABLISHING AND MAINTAINING NETWORKS

A shared vision, expected positive community impact, and mutual benefits are the basic requirements for a network to be established.

Trust and respect among members are necessary conditions for efficient operation of the network. Together, they contribute to advance a stronger sense of cohesion and capability of reaching and achieving the network's goals. In contrast, lack of trust and suspicion surrounding relationships results in fragile organizational structures that rarely match their operational costs. Trust builds networks that are resilient, flexible and efficient. When people trust each other, it is much easier to respond to change in an effective and coordinated manner. Moreover, in an atmosphere of trust,

people are more likely to be understanding of others' mistakes. A reality bound to arise when multiple organizations work together. At the same time, when mutual respect is a core principle of the network, it is easier for new connections to happen (Long et al., 2013).

Effective communication is also a key factor in maintaining networks, both internally and externally. Internal communication refers to the exchange of information and ideas among members of the network and, particularly, the coordinating body or person and the rest of the membership. Internal communication typically utilizes tools such as e-mails, team meetings (offline and in person), group chats, and forums.

Well-structured meetings might also be considered as an internal communication tool that facilitates low-threshold participation in a network. Effective internal communication is essential to keep the members committed, motivated and up to date about the work of the network and its members. Moreover, well-working internal communication channels help in maintaining a feeling of belonging among network members.

External communication refers to information sharing with stakeholders outside the network, such as decision-makers, public institutions, and the public. The tools used in external communication usually include bulk e-mails and newsletters, social media, and press releases.

Networks often require a **dedicated management**. Facilitation, coordination and administration are all equally important elements of management. Facilitation and coordination focus on connections

and processes that promote the collective action of a network's membership. Administration is fundamental for organizing collaborative activities, ensuring the logistical orchestration of activities that move the network towards its goals and maintains its foundation (Stephenson, 2008). By making the best use of members' resources and apply designated and stable roles, the network can foster stronger collective action and can facilitate knowledge transfer in the inevitable cases of personnel transitions. Clear roles and functions also support planning ahead and managing expectations.

From the members' side, **clear and consistent commitment** is needed to sustain the network. This means dedicating resources to attending meetings and participating in the work of the network, as well as generally maintaining positive relationships with other members.

Last but not least, a **clear mandate** of the network is seen by experts as crucial. In case of Switzerland, InfoDrog's authority and competence is recognized by the government via their official mandate, and involvement in policy discourse. In the case of Portugal, in lieu of an official mandate, members and collaborators both implicitly (by taking on the rotating coordination roles) and explicitly (by communicating so externally) recognize their network and thus assign power to it.

5

BARRIERS, FACILITATORS AND RECOMMENDATIONS

5. Barriers, Facilitators and Recommendations

The use of partnerships, alliances, networks, and other forms of collaboration is a widespread method for achieving strategic goals in the third sector. This is particularly true because the operation of civil society organizations, especially grassroots and peer-led collectives, is often influenced by a variety of factors that are easier to handle in cooperation than by a single organization alone. This section identifies the challenges that organizations may face when building and maintaining networks, and maps variables that facilitate founding and sustaining these systems.

BARRIERS TO ESTABLISHING AND MAINTAINING NETWORKS

On the macro level, the **diverse political climate** across the continent has been clearly identified as a major influencing factor. While in some countries public discourse and policymaking around drugs, drug use, mental health and harm reduction are guided by ideological, and mainly prohibitionist, considerations, in other countries governments are rather pragmatic and evidence-focused. A lack of clarity of concepts in the drug policy field has also been highlighted as a factor contributing to difficulties in maneuvering prohibitive local political climates. *“When we say harm reduction, we mean a completely different set of values than most*

politicians” (Niklas Eklund, Stockholm Drug Users Union).

Moreover, **in post-soviet democracies, spaces for civil organizing are shrinking** at a concerning pace. With the rise of extremist groups in political spaces, the stigma around sensitive psychosocial and societal issues is also on the rise. This, in turn, contributes to hostile macro environments that affect service providers’ reality as well as capacities and possibilities to network with other groups. It is clearly more difficult to found, sustain, and develop harm reduction networks in an environment where the legal system deems people who use drugs (and sometimes service providers) as criminals. General hostility towards civil society organizations in general, and a vague legal environment are also hindering factors.

In such situations, international networks are excellent partners to support advocacy efforts and offer training and community support. Moreover, for networks that exist in such repressive national contexts, advocating for the human rights of people who use drugs internationally or working towards supranational directives (that might bind their governments to less repressive measures) might be the only accessible area of work.

Another barrier identified by the experts was the fact that most national network members work primarily with communities providing direct services. Therefore, any network-related tasks constitute an **additional commitment**. *“The work with people cannot fail, the work in the networks, which are essential for more and better forms of participation, often takes a back seat.”* (Marta Borges, DICD). This problem is a matter of human resources and

funding. In many cases, member organizations are not able to sustain their networks with their own resources and without seeking external support. Therefore, allocating funding specifically supporting the operation of networks is necessary.

Finally, criminalization of drug use is considered by experts as the primary obstacle in organizing any efforts to reduce harms. The illegal status of people who use drugs and risks that come with it are seen as the most significant harm-inducing factors. Hence, advocating for the decriminalization of all drugs and drug use is also crucial.

FACILITATORS TO ESTABLISH AND MAINTAIN ACTIVE NETWORKS

The identified barriers can seriously hinder efforts to establish national harm reduction network. This is especially true in places where they do not yet exist, as well as running a risk of undermining the work of already functioning ones. To balance out the possible negative impact of barriers, organizations engaging in national harm reduction networks can identify and exploit facilitators that may exist in their environment.

According to most EU documents, only through an active public sphere can a cohesive and purposeful political community come into being (Keijzer

and Bossuyt, 2020). The critical significance of civil society organisations in harm reduction has been confirmed by the recent Covid-19 crisis. Nonetheless a union-wide directive addressing the inclusion of the affected population(s) in matters that concern them is yet to be crafted. **A mandate by an appropriate EU level authority** (e.g., the European Commission) for civil society involvement would significantly facilitate the work of such networks. Such mandate, however, would need to be accompanied by appropriate funding to avoid only symbolic significance, and foster meaningful activities. An official mandate, besides serving as an official recognition of expertise, can act as a protective mechanism for service providers in the face of hostile local political environments. Meanwhile, a strategic decision to fund networks can likely incentivize collaboration over competition, which is one of the main challenges in the harm reduction field where national-level resources are very limited.

A clear definition of harm reduction and clear **guidelines** for developing harm reduction policies might also be useful to advocate at the EU level. The recent public health crises clearly illustrate the importance of establishing harm reduction partnerships between grassroots organizations and political institutions. Governments therefore shall be required to adopt **harm reduction as an essential element of drug policy**, and meaningfully involve key civil society and community partners and stakeholders in the formulation, implementation, and evaluation of policy. Funding should be secured for planning and delivery of services, providing staff with training, developing tools for effective monitoring, and investing in innovation.

6

NEEDS AND HOW TO ADDRESS THEM: THE ROLE OF THE C-EHRN IN SUPPORTING THE NATIONAL HARM REDUCTION

6. Needs and How to Address Them

According to the experts, membership in or relationship with the C-EHRN is highly valuable and brings a range of important advantages, among others, benefiting from the advocacy power of being part of a large organization with sustainable funding, and the perceived relative legal safety of the Netherlands, where the network is based. Correlation network is also highly appreciated for its ongoing efforts in organizing expert group meetings, hosting different networking formats, and producing, translating, and disseminating resources. With respect to further possible avenues to support national harm reduction networks, the following were emphasized:

- Developing a guide to support advocacy efforts in countries and regions where local organizations and networks lack capacity and resources, including, e.g., what to do to get through to political actors, what messages to use in contacts with them, etc.
- Publishing country comparisons of availability of data on specific issues and populations that can be used for advocacy purposes towards better monitoring and better-quality services.
- Monitoring and evaluation of national drug strategies to reveal within Europe differences in governments' approaches to drug policy.
- Providing a space for the transfer of knowledge and information-sharing (e.g., forum that is dedicated to the real-time exchange of practices, to mentoring in specific areas) to facilitate Correlation networks' members access to one another and mutual support.

- Advocate for standardized monitoring systems across EU member states.
- Connect with large funding bodies (e.g., Robert Carr Foundation) to explore key issues globally, and potentially facilitate partnerships for developing fundable projects.

"[Until now] I had no one to talk to about my networks, so I really see the value of maintaining this forum (...). It would be great to expand it, but we need space to decide where we want to take it" (Daan van der Gouwe, Trimbos Institute)

"Correlation is a lifeline... to see what is around, what other countries are dealing with"

(Niklas Eklund, Stockholm Drug Users Union)

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CONCLUSIONS

International harm reduction is facing constantly changing developments and challenges. Despite a growing body of evidence that suggests peer associations and non-governmental organizations can provide high quality services and reach out to populations that public services cannot or do not want to access (e.g., because of ideological or logistical constraints), the provision of harm reduction services remains inadequate in many countries. It seems that the best harm reduction practices have emerged from cooperation between civil society organizations and state agencies (typically, the latter providing the resources, and the former the grassroots knowledge). Operationalizing such partnerships on an ongoing basis has demonstrated its efficacy, especially during the past years (O`Gorman and Schatz, 2021).

The role of civil society organizations in developing and implementing effective harm reduction measures is essential (Rigoni et al. 2021). Therefore, policies are needed that enable and foster an environment where civil society organizations can cooperate and create networks. To be meaningful and impactful, such policies need to be accompanied by adequate funding and a clear mandate for harm reduction service providers and their networks. This 'enabling environment' for civil society at the national level also includes issues related to the possibility of establishing cooperation with public health and social services addressing drug use, and drug regulations and law enforcement practices that may affect the functioning of harm reduction services.

Building sustainable collaborations and collaboration networks with national agencies

requires mutual trust and recognition of the strengths and limitations of all actors involved, and a shared overarching goal to reduce the harms for people who use drugs and communities.

Maintaining a national network in the field of harm reduction requires a supportive environment - both in terms of the political climate and the strength and resilience of the civil sphere. To enhance sustainability, networks require a clear mandate and roles should be assigned to a network and the individuals coordinating it. Furthermore, clear commitment (both individual and organizational), also expressed in budgeting and staffing decisions; efficient and open communication; and benefits resulting from membership, are all key factors contributing to the long-term success of harm reduction networks.

At the international level, building capacities for advocacy, sharing stories and successes, coupled with substantial emotional support, and recognition as a partner by esteemed institutions, are benefits enjoyed by network members.

Correlation – European Harm Reduction Network is perfectly positioned to act as a point of convergence for organizations and their national networks, connecting individuals, collectives, and projects. Being an esteemed and well-connected organization, it can provide its members with a greater sense of belonging, support, and professional advice.

C-EHRN has a respectable track record of supporting different EU policy and health initiatives, with its position in the wider European civil society sphere reflected in chairing the Civil Society Forum

on Drugs, and membership in the European Civil Society Forum on HIV, Hepatitis and TB. C-EHRN is also actively involved in various expert groups established by European agencies (e.g., EMCDDA, ECDC), the Pompidou Group of the Council of Europe, and WHO Europe. It is therefore perfectly positioned to support network members in accessing these international institutional spaces, and in building their capacities to participate in policy making advocating for the rights of people who use drugs, both internationally and in their national setting.

**Building Solidarity and
Mutual Support**

8

**REFERENCES AND
FURTHER READINGS**

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