WOMEN AND GENDER NON-CONFORMING PEOPLE WHO USE DRUGS SURVIVING VIOLENCES DURING QUARANTINE

RECOMMENDATIONS TO BE ADDRESSED IN THE PRESENT DAYS AND BEYOND Metzineres, Environments Shelter for Women Using Drugs Surviving Violences is made up of 250 women and gender non-conforming people in multiple situations of vulnerability.

often invisible under the stigma and discrimination that results in a systematic violation of our rights. Our precariousness and insecurity has been increasinge due to the State of Alarm.

90% of us have survived or are surviving violences by our partners. Having to live with them during confinement, increases immeasurably the danger of being abused, to the point of fearing for our physical and emotional integrity.

More than 70% of us have problems related to drug use, legal or illegal. These days we see a decrease in quality of the sustances we buy in the illegal market, which are becoming increasingly difficult to acquire: fewer selling spots, pricing doble and more adulteration. It's now higher the possibility of sharing utensils, worse withdrawal syn drome and overdoses much more likely.

People who inhale/ smoke substances (tobacco, cannabis and / or derivatives, opioids, methamphetamine, amphetamine, cocaine among others), those who suffer from chronic diseases or have a depressed immune system, are more at risk of serious complications if infected with COVID-19.

These days, those of us who buy drugs in flats such as "narco rooms, also known as "narcopisos", are forced to use them there because of the fear of being identified by the police, having the substance confiscated or even being fined. This forces us to consume, and sometimes stay overnight, without hygienic conditions, in places where abuse, violence and sexual assault are common.

Institutional and police persecution do nothing but put us at risk.

Although access to Methadone Maintenance Programs is becoming easier, most of us are either users of other substances or as the majority of people poly drug users, and therefore have no alternatives. While some psychotropic medicines can reduce our discomfort, the lack of medical appointments with our trusted doctor keeps us from being able to deal with them. On the other hand, admissions to detoxification centers and outpatient treatment have been stopped. 58% of us do not have a safe home and 51% do not have a roof above our heads. The few shelter spaces we rely on, have either reduced their services or closed completely.

The alternatives we are offered are far from our neighborhoods, which can lead to isolating ourselves from our main environment and support networks. We are not allowed to bring our pets inside or be with our male partners.

We are anxious about highly restrictive confinement rules and forced abstinence. Spaces of supervised consumption are far from where we are sent for confine ment, we aren't offered the necessary basics for substance use via injection nor inhalation. There isn't specialized staff that can help us deal with the frustrations that come from this situation, like dealing with anxiety, preventing self-harm or assuring a healthy sleep pattern.

45% of us suffer from mental diseases. Insecurity, loneliness, anxiety, and paranoid ideas are increasing during reclusion.

Without access to regular care and support services, isolation and discomfort increase drastically and undermine our adherence to treatment, which can lead to an increase in suicide.

Those of us living with HIV, hepatitis and/or other sexually transmitted diseases also see our access and adherence to treatment at risk, and this increases the chance of transmission.

Most of us work in precarious conditions, without any job guarantee: we are sexual workers, we are street sellers, recyclers, beggars. We have no right to leave or a legal unemployment. Those of us who are in an irregular situation cannot receive a guaranteed income. We are concerned about police persecution.

We are a particularly criminalized group, subject to the arbitrariness and abuse of power by security forces, often totally exposed, with no defense mechanisms.



In order to stop the expansion of COVID-19, we are under mandatory confinement, and the economical, social and health measures that have been decided do not take into account the complexity of our realities.

The small amount of solutions addressed to us have been made without our participation, oblivious to the fact we know best in terms of what we need. In this sense we want to be part of their design and implementation.

These words are our way of helping to align the chosen measures with a perspective that takes into account human rights, intersectional feminism and harm reduction, empowering women and gender non-conforming people using drugs that are drug users and surviving to violences in multiple situations of vulnerability, taking into account our heterogeneity and specific needs, integrally and holistically.

\cdot Guarantee safe housing options adapted to different people and circumstances

- · Adapt 24h care spaces exclusively for women and gender non-conforming people.
- · Allow access to safe housing with non-aggressive partners and pets.
- Provide individual spaces for those who need it using hotel/hostel rooms where the principles of the approach "Housing First" are applied.
- · Activate the necessary mechanisms needed to provide a safe space for confinement to women survivors of sexist violence, and their daughters and sons.
- \cdot Slacken confinement restrictions when they do not increase COVID-19 transmission risks.
- •Provide entertainment and connection opportunities during confinement at shelters and ensure care in times of crisis.





\cdot Ensure access to food, hygiene and protection

•Providing both professionals and participants with understandable and accessible information, as well as essential supplies such as face masks, disinfectant gels and gloves to protect against possible COVID-19 transmissions.

·Provide clean clothes, personal care products and access to washing machines, dryers, showers.

•Ensure space to store personal belongings, without any restrictions on access.

•Provide care services to people with drug related problems, within an integral and holistic approach.

 Guarantee safe spaces with social and healthcare support, open 24 hours a day, with spaces for supervised consumption and unlimited access to NSP and Naloxone, to treat any possible overdose.

 \cdot Provide specialized medical and social care.

 \cdot Guarantee the chance to follow-up an adjust treatments.

- Assure flexibility of access and adherence to Methadone Maintenance Programs by incorporating emergency dose dispensing immediately available when needed.
- · Facilitate access to other psychoactive drugs that can alleviate withdrawal syndromes such as
- Take into consideration the use of tropicamide and cannabis for those who use these substances as therapeutical substitutes.
- · Address the sexual and reproductive health of gender dissident people and the LGBTQQ + community.
- · Reactivate access to detox and non-outpatient treatment and make referrals from different centers easier.
- · Offer assistance in the commute from confinement sites to treatment facilities in cluding those delivering to harm reduction services.
- Monitor the market for illegal substances and propose safe supply models as opposed to the declining supply and it's quality.

Activate Services for the detection, care and monitoring of situations of sexist violence against women and gender non-conforming people in multiple situations of vulnerability



- Raise awareness of the stigma and discrimination faced by women and gender non -conforming people surviving violences,through empathy, solidarity and mutual support.
- Develop non-intrusive strategies for detecting and addressing sexist violence, which foster the empowermentwomen and gender non-conforming people, without eliminating their autonomy and decision-making potential.
- Strengthen specific support lines for women and gender non-conforming people with mental health issues, problems related to drug use, LGBTQQ + and/or those who practice sexwork/ sex for survival.
- Ensure individual, personalized and trauma-informed follow-up to all survivors of sexist violence in order to prevent secondary trauma or retraumatization.
- · Protect visits to children in the absence of custody.

Deploy economic measures aimed at people of our collective with economies based on informal work and support services deliveryDeploy economic measures aimed at people of our collective with economies based on informal work and support services delivery

- Create an extraordinary benefit for those groups known to be most vulnerable, including people in irregular administrative situations and/or without a formal or stable income.
- · Withdraw financial penalties from all homeless people who have been fined or could be fined during the days of confinement.
- Offer alternatives for collecting possible assistance to those who do not have or have inaccessible bank accounts.
- · Facilitate, streamline and flexible access to guaranteed income.
- · Guarantee that grants and financial aid to entities and collectives performing basic tasks of accompanying people in multiple situations of vulnerability during confinement are granted within the established deadlines, extending the amount of assistance if needed.
- Review short and medium term tax and contribution obligations of social and sanitary entities/ services and their workers, making it easier to pay VAT in 2020.



· Caring for caregivers

- Provide up-to-date information and means of communication that facilitate the task of referral and coordination between available resources and services frequented by women and non-conforming gender people such a social emergency services, as well as other spaces and resources that remain open during confinement.
- Provide psychological support to all staff involved in the care of people in vulnerable situations.

Many of us do not have support networks, family or a space to spend time in. Criminalization, racism and exclusion are rising in these times of uncertainty.

We are thankful to our neighborhood networks at Raval, as well as all those people and groups that accompany us and show so much generosity in these times of crisis.



If you are a drug user we recommend you consult our :

"Guide COVID19 HARM REACTION. At Metzis we don't want Corona"

You can contact us through our address: metzineres@metzineres.org You can know more about us through our web metzineres.org and through social networkstwitter, instagram i facebook

If you share this manifest, use the hashtags:

#YoNoMePuedoQuedarEnCasa

#NadaSobreNosotrasSinNosotras #ApoyoMutuoC19

#JoNoEmPucQuedarACasa

#aMetzisnoVolemCorona #SuportMutuCovid19 #ResSobreNosaltresSenseNosaltres





A METZINERES NO VOLEM CORONA