WHEN SURVIVAL BECOMES ADVOCACY

How Charne Roberts turned survival into national advocacy with SANPUD and Love Alliance support from 2020 to 2025.

Early wounds and survival

Charne Roberts speaks in a voice carved by loss and hardened by care. Born and raised in Woodstock, Cape Town, she remembers a childhood where "violence wasn't something I only heard about on the news, it was part of everyday reality." That environment of gangsterism and police brutality set the frame for a life that moved from survival to solidarity and from private trauma to public advocacy. Her story shows how targeted funding and organisational support, including a partnership between the Love Alliance and the South African Network of People Who Use Drugs (SANPUD) that began in 2020 and runs through the end of 2025, helped turn grassroots trust into measurable change.

Charne names the wounds plainly. She speaks of repeated childhood sexual abuse, the murder of her fiancé and a house fire that killed two nephews, "wounds that stayed with me, each one layering pain on top of pain." She refuses moralising language about substance use. "For me, drugs were not just a drug. They were a crutch. A pillar of strength. A way to survive when life felt impossible." That framing, substance use as survival rather than choice, became the moral centre of her advocacy.

First contact and the turn to rights

Her first contact with people who use drugs was practical and ordinary, "times that I went and bought drugs." Those visits exposed systemic harms. A 2018 needs assessment, where she met Angela McBride, and weekly female support groups at TBHIV Care revealed a pattern: child removal, exclusion from employment, hidden and risky use, poverty, trauma and police violence. "IT'S LIKE THE JUSTICE SYSTEM just failed women who use drugs," she says, naming the institutional collapse she witnessed. Police abuse was a recurring horror. Women were raped and then turned away when they tried to report it or coerced into sex by officers who relied on the stigma of "a druggie" to silence them.

From peer support to clinic advocacy

Charne moved from listening to leading. She co-facilitated female support groups, joined the Cape Town Network of People Who Use Drugs and worked on a programme that educated people who use drugs about HIV, encouraged testing, accompanied clients to clinics and supported treatment adherence. Her method was practical and relational. She would "visit the clinic a day earlier to raise concerns about how the community was being treated," building relationships with matrons

and nurses so people could be treated "with dignity and respect." She accompanied tuberculosis patients through six-month inpatient treatment, traced people lost to follow up and celebrated when those she supported reconnected with family and adhered to antiretroviral therapy.

Her documentation of police abuse combined written templates with audio recordings. When she presented that evidence to a victim empowerment officer, two abusive officers were removed from duty and warned. Legal action remained fraught because survivors feared retaliation, but the intervention showed how community led evidence could produce immediate institutional responses.

SANPUD, the Love Alliance and evidence for change

Through community work she was introduced to the South African Network of People Who Use Drugs, where she became a community linkage officer and later national advocacy coordinator. Her role bridged lived experience and organisational strategy. She coordinated provincial officers, reviewed reports, held weekly check ins and "wrote funder reports (including for the Love Alliance), and carried community voices into national platforms." That work shows how funding translated into capacity, staff coordination, documentation and the ability to bring community evidence into policy spaces.

The first project SANPUD implemented with Love Alliance support was the development of a drug policy and harm reduction indicators database for the ten Love Alliance priority countries, delivered with Mainline as a resource partner in 2021 and 2022. Charne describes it as "a practical advocacy tool" that produced comparable country snapshots and documented gaps. That evidence underpinned advocacy briefs, campaign planning and donor proposals, enabling community networks to argue from data rather than anecdote.

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Capacity building was another direct outcome. SANPUD's collaboration with the International Network of People Who Use Drugs on the Our Rights, Everyone's Rights training created a shared rights language and a stigma challenge toolkit for networks across priority countries. The training produced tailored advocacy roadmaps aligned to global AIDS strategy targets, converting stigma from a private harm into a structured agenda with duty bearers, timelines and monitoring.

FEMALIVE, resilience and what comes next

Those roadmaps led to practical outcomes. Community led monitoring identified stigma, followed by clinic engagement and staff sensitisation, and then open clinic days where people who use drugs accessed HIV, tuberculosis, sexually transmitted infection and hepatitis services in low stigma environments. Although open clinic days were not directly funded by the Love Alliance, they were activities Charne carried out as part of her SANPUD work, and her time at SANPUD was supported by Love Alliance funding, which helped make that outreach possible.

A central achievement of Charne's advocacy is FEMALIVE, a campaign she launched because mainstream gender-based violence responses "rarely centre" women who use drugs. FEMALIVE's silent walks during the 16 Days of Activism made "their lives and losses visible" and linked gender-based violence prevention to harm reduction and decriminalisation. For Charne, drug policy is a gender justice issue. Criminalisation and stigma fuel violence, while harm reduction and decriminalisation can reduce it.

Charne credits the skills and mentors who helped her lead: empathy, active listening, discipline, conflict resolution, quality control and a commitment to mentoring staff. She balances accountability with care and refuses tokenism. "If it's just photos and quotes required then there is a need to push back because where is the actual decision-making power," she warns, insisting that lived experience must be translated into strategy rather than exploited for optics.

"Surviving isn't the same as 'coping well,' and it still counts."

Her message to readers is simple and urgent. Resilience is raw and unromantic. "Surviving isn't the same as 'coping well,' and it still counts." Rights are unconditional. "Drug use never cancels your humanity." Solidarity is the engine of change. Peer networks, trust and collective action turn survival into power. The Love Alliance and SANPUD partnership, from 2020 to the end of 2025, shows how funding can amplify community knowledge, protect survivors and demand dignity when it backs people who have lived the problem and equips them to change the systems that keep harming them.