



# HARM REDUCTION

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## C O A L I T I O N

### US-BASED ORGANIZATIONS IN SUPPORT OF NEEDLE EXCHANGE:

AME Church Conference of Bishops  
American Academy of HIV Medicine  
Johns Hopkins School of Public Health  
Human Rights Watch  
Physicians for Human Rights  
American Medical Association  
American Bar Association  
American Public Health Association  
U.S. Conference of Mayors  
American Foundation for AIDS Research  
National Alliance of State AIDS Directors  
American Civil Liberties Union  
Episcopal Church  
Latino Commission On AIDS  
NAACP  
National Alliance of Methadone Advocates  
National Association of People with AIDS  
National Minority AIDS Council  
New York Academy of Medicine  
The Presbyterian Church (USA)  
United Church of Christ  
University of Alabama  
University of Colorado at Denver  
University of Hawaii  
University of Kansas  
University of Washington  
World Bank  
Yale University School of Medicine

### LIFTING THE FEDERAL BAN ON SYRINGE EXCHANGE FUNDING

**For twenty years**, Congress has enacted prohibitions on the use of federal funds or District of Columbia city funds for syringe exchange programs, although states and localities have been free to use their own funds to operate syringe exchange programs at their discretion. By maintaining this ban, Congress has failed in **(1)** using public health measures to control disease, **(2)** implementing interventions that could save thousands of lives and millions of dollars in treatment costs, and **(3)** doing what is necessary to help people get into treatment for addiction.

Over 8,000 new HIV infections and over 15,000 new hepatitis C infections occur every year due to syringe sharing among people who inject drugs. These infections are preventable through syringe exchange programs, but the ban on federal funding starves programs of resources and curtails their ability to reach people at risk. The federal ban has devastating effects on people of color: African Americans account for over 50% of all AIDS cases attributed to injection drug use, while Latinos account for nearly 25%. Syringe exchange programs

are highly cost-effective. The lifetime cost of medical care for each new HIV infection is \$385,200; the equivalent amount of money spent on syringe exchange programs would prevent at least 30 new HIV infections.

The federal ban is currently maintained primarily through Appropriations bills. The following language appears in the Appropriations bills for fiscal year 2007:

*Notwithstanding any other provision of this Act, no funds appropriated in this Act shall be used to carry out any program of distributing sterile needles or syringes for the hypodermic injection of any illegal drug. Section 505 of Public Law 109-149 (Departments of Labor, Health and Human Services, and Education, and Related Agencies Appropriations Act, 2007)*

The Harm Reduction Coalition calls upon the 110th Congress to finally lift the federal ban on syringe exchange funding.

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### FEDERAL SCIENTIFIC REVIEW ENDORSES SYRINGE EXCHANGE PROGRAMS

The consensus of six federal research reports between 1991-95 led Secretary of Health and Human Services Donna Shalala to state in 1998: *"A meticulous scientific review has now proven that needle exchange programs can reduce the transmission of HIV and save lives without losing ground in the battle against illegal drugs."*

This conclusion was reiterated in 2000 by Surgeon General David Satcher, *"After reviewing all of the research to date, the senior scientists of the Department and I have unanimously agreed that there is conclusive scientific evidence that syringe exchange programs, as part of a comprehensive HIV prevention strategy, are an effective public health intervention that reduces the transmission of HIV and does not encourage the use of illegal drugs."* (For full citations & links, see [www.harmreduction.org/article.php?id=473](http://www.harmreduction.org/article.php?id=473))

## THE STATE OF SYRINGE EXCHANGE IN THE UNITED STATES

### National Survey of Syringe Exchange Programs 2000 at Beth Israel Medical Center

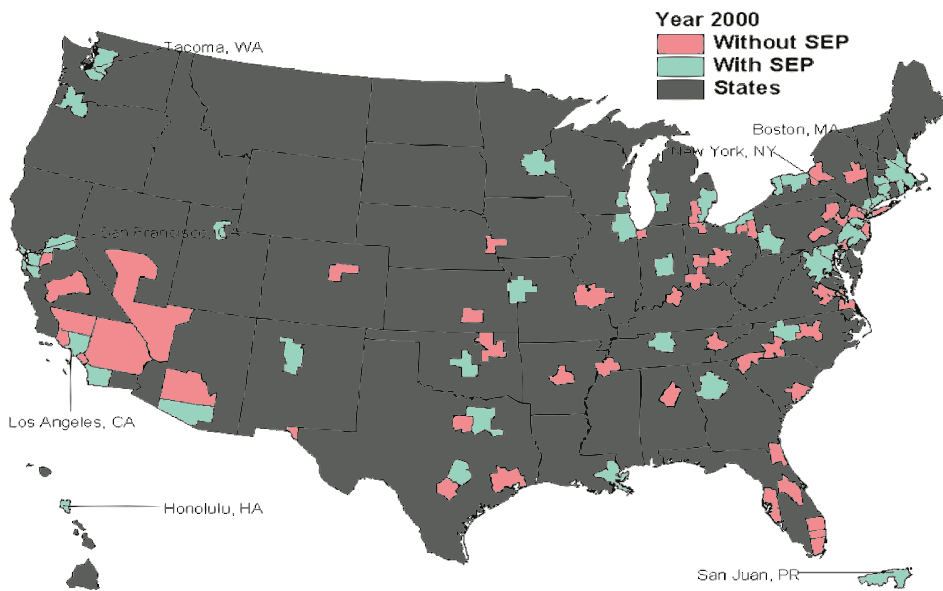


Figure 1.3 Distribution of Syringe Exchange Programs in 96 Metropolitan Areas

There are over 200 legal syringe exchange programs operating in 36 states. However, as this map shows, these are not well distributed among the 96 major metro areas in the US.

- 14 states have no known SEP.
- 6 states have no legal method for people to acquire sterile syringes.
- 26 states legally allow syringe exchange programs.
- 31 states allow pharmacy sale of syringes to IDUs.
- 16 states allow both.
- 5 states have cities that allow SEPs, though SEPs are not authorized statewide.

## SYRINGE EXCHANGE WORKS TO REDUCE HIV

### NEW YORK REDUCES HIV RATES AMONG IDUs BY 75%

A 2005 study of HIV trends in New York City published in the journal *AIDS* analyzed HIV infection rates among people who inject drugs in New York following the establishment and expansion of syringe exchange programs.

In 1990, 54% of injection drug users (IDUs) were HIV-positive, declining to only 13% of IDUs in 2001 – a 75% reduction. A 1997 study of 81 cities around the world published in *Lancet* compared HIV infection rates among IDUs in cities that had SEPs with cities that did not have SEPs. In the 52 cities without SEPs, HIV infection rates increased by 5.9% per year on average. In the 29 cities with SEPs, HIV infection rates decreased by 5.8% per year. The study concluded that SEPs appear to lead to lower levels of HIV infection among IDUs.

### AMERICAN MEDICAL ASSOCIATION CALLS FOR END TO FEDERAL BAN

*“The AMA: (1) encourages needle exchange programs; (2) will initiate and support legislation revoking the 1988 federal ban on funding for needle exchange programs for injecting drug users; and (3) strongly encourages state medical associations to initiate state legislation modifying drug paraphernalia laws so that injection drug users can purchase and possess needles and syringes without a prescription.”*  
(H-95.958 Syringe and Needle Exchange Programs)

### 75% OF AMERICANS SUPPORT SYRINGE EXCHANGE PROGRAMS

After learning that government agencies and scientific organizations endorse syringe exchange, seventy-five percent of Americans said they supported needle exchange programs to help stop the spread of HIV in a 1997 national survey conducted by the Kaiser Family Foundation.

## SYRINGE EXCHANGE PROGRAMS GET NEEDLES OFF THE STREETS

Research demonstrates that the presence of a syringe exchange program results in fewer used syringes improperly discarded. Research collected from states across the nation shows that the presence of a syringe exchange program does not result in an increase in discarded syringes in public.

- In Baltimore, after an SEP was implemented, the number of inappropriately discarded syringes decreased by almost 50%.
- In Portland, the number of discarded syringes decreased by almost two-thirds after the NEP opened.
- In 1992, Connecticut repealed a law forbidding the sale of syringes without a prescription. As a result, reports show a reduction in needle sharing by 50 percent and a decrease in HIV infections by over 30 percent. In addition, law enforcement officials experienced two-thirds fewer needle stick injuries.
- In San Francisco, approximately 3.5 million syringes were recovered and safely disposed of in 2000. These included approximately 2 million syringes recovered at SEPs.