# Moving the Needle on Syringe Exchange

The decision to lift the ban on federally funded syringe-exchange programs is gaining bipartisan momentum on Capitol Hill. This July, a new bill recommending lifting the ban is scheduled to hit Congress. Has the time finally arrived for evidence-based science to prevail over moral debates around the issue of providing clean syringes for safer injecting?

July 2, 2008 By James Wortman

---

Since the days when Bill Clinton was president, overwhelming evidence indicates that providing injection-drug users with clean syringes has a significant impact on reducing the spread of life-threatening illnesses like AIDS and hepatitis C among intravenous-drug users and their sexual partners. Studies conducted in the United States have repeatedly shown that syringe-exchange programs are powerful tools in preventing the spread of these blood-borne illnesses. In addition, it has been well established that when people access syringe-exchange programs, they are often likely to simultaneously access critical health care, information and support. They are more likely to get into care and on treatment, and find the support they need to continue both. And yet, since even before the Clinton era, federal funding restrictions, first implemented in 1988, have prevented our government from supporting needle-exchange programs. As a result, local state officials and syringe-exchange and harm-reduction organizations must scramble for resources to implement the lifesaving programs.

Despite 20 years of debate and experience with syringe exchange in the United States through nearly 200 programs, the, well, needle, has barely moved on this issue. That is, until recently. On June 18, 2008, a letter signed by 55 members of Congress (including four Republicans) was sent to House of Representatives Speaker Nancy Pelosi and Minority Leader John Boehner urging that litigation be passed to remove the ban and allow for federally funded syringe-exchange programs.

“We believe it is now time to take a fresh look at the epidemic here at home, bolster efforts to reduce HIV infections and allow states to design programs with proven results,” says the letter. “As supporters of effective and evidence-based HIV prevention, we are writing to urge you to remove the restrictions on use of federal funds for syringe-exchange programs (SEPs) in the Department of Labor, Health and Human Services, and Education, and Related Agencies Appropriations Act.”

The congressmen and congresswomen are not alone. According to their letter, “Syringe exchange

has been extensively researched and endorsed by many leading experts and professional associations including the American Medical Association, the Foundation for AIDS Research (amfAR), the Infectious Diseases Society of America, the American Psychological Association, the American Academy of Family Medicine, the American Academy of Pediatrics, the American College of Preventative Medicine, the American Nurses Association, the Association of Nurses in AIDS Care, the American Academy of Physicians Assistants, and the HIV Medical Association."

"The time is long overdue for us to end the failed policies of the past by lifting the federal ban on funding for syringe-exchange programs," said Representative Elijah E. Cummings (D-MD) in a June 19 press release. "A growing number of members of Congress recognize the critical role that these programs play in combating the HIV/AIDS epidemic in our communities. The American people demand and deserve these critical services, and we must answer their call."

Cummings circulated the letter along with representative Michael Castle (R-DE). "I am pleased to join my House colleagues to support lifting the ban on federal funding for syringe exchange, which has hindered our ability to respond effectively to the HIV/AIDS epidemic," said Castle. "We know that syringe-exchange programs work—they are a critical tool in putting an end to the spread of HIV, while in many cases also providing greater access to health care, education and addiction treatment."

The ban on syringe-exchange programs has contributed to the continued rise in the number of people infected with HIV through the sharing of needles. In 2005, the Centers for Disease Control and Prevention (CDC) reported that 14,760 people with a risk factor related to IV-drug use received a diagnosis of AIDS or reported an HIV infection. The latest CDC figure for that group amounts to 383,000 people.

A bill to remove the ban will be introduced in the House in July by Democratic Representative Jose Serrano of New York, who in June 2007 succeeded in lifting the ban on city-funded syringe-exchange programs in Washington, DC, where the rate of HIV infections is twice the national average. Injection-drug use is the second-most-common mode of HIV transmission among men in the District of Columbia, and it is the No. 1 mode of HIV transmission among women.

Critics of federally funded syringe-exchange programs find them morally troubling, as they believe that offering free, clean syringes to injection-drug users indirectly promotes the use of illegal drugs such as heroin. They favor, instead, substitution therapy, which is aimed to get IV-drug users to stop injecting illegal drugs. Allan Clear, executive director of the Harm Reduction Coalition—a New York-based group leading the charge for the removal of the federal ban—finds criticism of these vital programs a barrier to successfully fighting the spread of HIV and other diseases that can be transmitted by sharing syringes.

"Syringe exchange is the most effective HIV prevention we have for drug injectors," Clear told *POZ*. "The arguments never actually stand up, whatever they are. Sending a bad message to children is one of the favorites. I'm not sure what kind of message you're sending to a child if you're willing to let their parents get infected with HIV or hepatitis C. That's not a good message

either.”

With Democrats gaining a Congressional majority, however, more and more federal leaders are beginning to see the lifesaving value of such programs. In New York City, for example, the number of new AIDS diagnoses among injection-drug users has dropped 90 percent since 1993 largely thanks to state- and city-funded interventions that provide syringe exchange.

“The support for lifting the federal ban on syringe-exchange programs continues to grow because these programs have repeatedly shown they stop the spread of HIV and hepatitis C,” says Clear. “We hope that Congress will decide to save the lives of thousands of Americans and vote to lift the federal ban.”

Clear hopes that the vital litigation being introduced this month will pass and allow for similar efforts on a national stage. He hopes that the next U.S. president, to be elected in November, will see syringe exchange as a proven prevention tool.

“We’ve seen a lot of people become infected with HIV and die of AIDS completely unnecessarily,” says Clear. “We knew how HIV was transmitted back before we knew what HIV was. Injection-drug use facilitates that transaction so perfectly, and we’ve done nothing about it. We’ve lived with this ban for 20 years, and the drug-using community doesn’t deserve to have the most effective intervention denied to them. That’s discrimination and stigmatization.”

For more information or to read a copy of the letter, visit harmreduction.org.

---

© 2026 Smart + Strong All Rights Reserved.
http://beta.docker.realhealthmag.com/article/syringe-exchange-hiv-14873-8841