

Needle Exchange Funding Fact Sheet

Urge your Senator to support federal funding for needle exchange in this year's appropriations bill.

Injection Drug Use and Transmission of HIV and Hepatitis C

In the United States, injection drug use (IDU) accounts for 12-16% of new HIV infections, or up to 8,000 or more infections annually. IDUs represent 20% of the over 1 million people living with HIV/AIDS in the US and the majority of the 3.2 million Americans living with hepatitis C infection. The HIV epidemic among IDU's has a disproportionate impact on communities of color and women.

Around the World, there are an estimated 16 million IDUs of which nearly 20 percent (3 million) are HIV positive. More than 75 percent of IDUs live in low- and middle-income countries. Almost a third of new HIV infections outside of sub-Saharan Africa are attributed to injection drug use, yet as few as 8 percent of drug injectors have access to HIV prevention services of any kind. It is estimated that approximately 180 million people live with the Hepatitis C Virus (HCV) - most HCV infections around the world occur through unsafe injecting drug use.

Research Shows Effectiveness of Needle Exchange

Research in the US and internationally has shown that harm reduction initiatives, including syringe exchange programs, when implemented as part of a comprehensive HIV/AIDS prevention strategy, are an effective public health approach to reducing the transmission of HIV and other blood-borne pathogens include HCV. Research has demonstrated that syringe exchange programs do NOT increase drug use. Empirically based studies have also shown no increase in crime rates in communities that offer syringe exchange programs.

Federal Funding Ban

Despite the evidence that needle exchange reduces the transmission of blood-borne illness (including HIV and viral hepatitis), does not encourage drug use, and helps people who inject drugs enter into drug treatment, the United States has prohibited the use of federal funds to support these life-saving services since 1988.

Foreign Assistance: The ban on federal funding is currently applied to US foreign assistance and has kept PEPFAR (the President's Emergency Plan for AIDS Relief) from funding these life-saving, evidence-based services in resource-poor countries with exploding HIV/AIDS epidemics fueled by drug injection.

Why the Senate? Why Now?

The federal 2010 fiscal year begins October 1. This summer, the Senate and the House of Representatives have been preparing appropriations bills for all areas of government spending. The ban on federal funding for needle exchange is found in the Labor, Health and Human Services Appropriations Act and this year Congress has been taking steps to remove the ban language from that Act. In September the Senate will vote on this bill and they need to hear from you that you want them to support evidence-based prevention for injection drug users and lift the federal ban on funding needle exchange.

What You Can Do

- Send a postcard to your Senators
- Call your Senators: Let them know that you want them to:
 1. End the ban on federal funding of needle exchange;
 2. Let local authorities decide how and where needle exchange services can be offered; and
 3. Refrain from putting additional restrictions on such programs in Washington, DC or nationally.
- Educate your Colleagues/Classmates: PHR can help. For more information, contact Danielle at dfox@phrusa.org