

# Distribution Vs Exchange

The following information addresses the benefits of needle distribution vs needle exchange as a harm reduction strategy.

## BACKGROUND

The use of sterile needles and syringes, free from microorganisms for injecting drugs has long been accepted to be an effective means in reducing the incidence of blood borne pathogens such as HIV, hepatitis B and hepatitis C. The BC harm reduction distribution policy was introduced in 2002 and is supported by the BC Harm Reduction and Strategies and Services (HRSS) committee guidelines and Best Practice Recommendations for Canadian Harm Reduction programs. Efforts have thus shifted from one-for-one needle exchange to the implementation of needle distribution and safe disposal of used injection supplies. However, despite public support for needle distribution, the public has questions about the efficacy of needle distribution and the proper disposal of needles. The term 'needle' is used to include needles and the attached syringe. This information sheet aims to address these concerns and provides evidence to support needle distribution.

## WHY NEEDLE DISTRIBUTION AND NOT EXCHANGE?

The BC HRSS has promoted needle distribution since 2002. The Canadian Best Practice recommendations considers needle exchange to be "outdated and unsatisfactory". Limiting the number of needles distributed increases the tendency for clients to share and re-use the same drug injection equipment and thus increases the risk of transmission of HIV, hepatitis C and other infections. A policy of exchange reduces the effectiveness of a needle/syringe program and has devastating effects on public health. On the contrary, less restrictive policies with more syringe coverage has been shown to lower the likelihood of re-using, and sharing and transmission of blood borne pathogens. The HRSS guidelines state that clients should receive enough syringes to be able to use a new one for each injection; it also encourages agencies to promote distribution for secondary purposes in order to reach people who may not use the harm reduction distribution sites.

## WHY IS SAFE NEEDLE DISPOSAL IMPORTANT?

The safe disposal of used needles prevents re-using and sharing of needles, and also prevents community exposure to needles. Seeing discarded needles in the community can cause distress. However community needle stick injuries are rare and carry a negligible risk of hepatitis C transmission and there have been no reported HIV transmission from needle injuries in the community. People do not intend to harm others by discarding used needles but need an easy way to dispose of them safely.

Harm reduction programs help to remove most potentially infectious syringes from the community. It achieves this through community and staff education. The BC HRSS provides personal sharps containers; communities provide publicly accessible community needle drop boxes, needle disposal advice for the public, and pick-up of discarded drug injection equipment. Regular reviews with the Health Authority and other agencies should assess for compliance with regulations and monitor for the numbers returned and incidences of inappropriately discarded syringes. A review of international programs found the overall needle return rate was 90%.

## GOING FORWARD

Needle distribution and encouraging safe disposal, helps facilitate the use of sterile equipment for each injection, reduce transmission of blood borne pathogens and promote less discriminatory practice. Promoting public and staff awareness to support the work of the harm reduction programs and agencies will enable individuals, their families and communities to be safer and healthier.