Advocating for Syringe Exchange Programs

AMERICAN BAR ASSOCIATION
AIDS COORDINATING COMMITTEE
HIV Law & Practice Conference 2018

New Orleans, LA
February 22, 2018

William McColl
Vice President for Policy and Advocacy
AIDS United’s mission is to end the AIDS epidemic in the United States.

We seek to fulfill our mission through strategic grantmaking, capacity building, policy/advocacy, technical assistance, and formative research.

AIDSUnited.org
Syringe Services Programs & Vulnerable Counties

Syringe Services Programs (SSPs) are a proven and cost-effective approach for

- preventing transmission of HIV and viral hepatitis among people who inject drugs
- reducing risk of “accidental sticks” to sanitation workers and police
- engaging people who inject drugs in substance use treatment programs.

As the dual prescription opioid and heroin epidemics continue to grow, funding for SSPs must be scaled up to meet this rapidly increasing need.
Federal law permits use of funds from the Department of Health and Human Services (HHS) to support syringe access - with the exception that funds may not be used to purchase syringes or cookers.
Appropriations Strategy

- $100 million to Department of Viral Hepatitis
- Viral hepatitis precedes drug-use related HIV outbreaks
- 10% for syringe access doubles nationwide funding
DETERMINATION OF NEED JUSTIFICATION

1. Consult with CDC and provide evidence that their jurisdiction is experiencing or at risk for significant increases in hepatitis infections or an HIV outbreak due to injection drug use

2. States and localities must authorize syringe access, where necessary
State Policy Environment
(As of 2/20/18)

- Alabama - HB37
- Arizona - HB 2389
- Georgia – HB 161
- Iowa - SSB 3008 and HF2208
- Missouri - HB1620

https://www.nastad.org/maps/syringe-service-program-policy-environments-across-united-states
Thank You!
wmccoll@aidsunited.org
The New Orleans Syringe Access Program (NOSAP)

Allison Vertovec
CrescentCare
A brief history of NOSAP

- NOSAP had been operated by and housed within the Tulane Drop-in Center for years.
- When space needs developed, NO/AIDS Task Force hosted NOSAP services; as the agency’s mission expanded, it was determined that NOSAP would be permanently overseen by newly established FQHC CrescentCare.
- Fridays 2:30-4:30

Sec. 102-115. - Exceptions. [refers to Chapter 102 - OFFENSES AND MISCELLANEOUS PROVISIONS]
Nothing contained in this article shall be construed to prohibit the sale of hypodermic syringes or needles by licensed pharmacists or drug prevention and/or AIDS education programs as approved by the Department of Health and/or the State Department of Health and hospitals.

Louisiana Department of Health is currently developing policies and procedures for syringe access programs

<table>
<thead>
<tr>
<th>Year</th>
<th>2013</th>
<th>2014</th>
<th>2015</th>
<th>2016</th>
<th>2017</th>
<th>2018</th>
</tr>
</thead>
<tbody>
<tr>
<td>Disposed</td>
<td>121,423</td>
<td>126,079</td>
<td>126,079</td>
<td>126,079</td>
<td>126,079</td>
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<tr>
<td>Given</td>
<td>126,079</td>
<td>126,079</td>
<td>126,079</td>
<td>126,079</td>
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<tr>
<td>Weekly Client Avg.</td>
<td>72.1</td>
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<tr>
<td>Unique Clients</td>
<td>480.0</td>
<td>480.0</td>
<td>480.0</td>
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</tbody>
</table>
A brief history of NOSAP

- Expansion continues: number of syringes disposed and provided more than doubled than year before
- Rapid HIV/HCV testing offered weekly during NOSAP
- City Health department provides letter of support to provide additional legal protections

<table>
<thead>
<tr>
<th>2014 NOSAP Totals</th>
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<tbody>
<tr>
<td>Disposed</td>
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<tr>
<td>Given</td>
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<tr>
<td>Weekly Client Avg.</td>
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<tr>
<td>Unique Clients</td>
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</tbody>
</table>
A brief history of NOSAP

- Expansion continues: though weekly average number of clients decreased, overall client pool and disposal/distribution increased
- Rapid HIV/HCV testing offered weekly and linkage-to HCV follow-up care routinized through CrescentCare medical providers
- NHBS IDU cycle expands knowledge of NOSAP and uses NOSAP space for interviews

### 2015 NOSAP Totals

<p>| | |</p>
<table>
<thead>
<tr>
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<tbody>
<tr>
<td>Disposed</td>
<td>529,268</td>
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<tr>
<td>Given</td>
<td>535,980</td>
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<tr>
<td>Weekly Client Avg.</td>
<td>80</td>
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<tr>
<td>Unique Clients</td>
<td>728</td>
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</tbody>
</table>
A brief history of NOSAP

- During FY 2016, CDC resources to support allowable SSP activities must come from current CDC HIV and/or viral hepatitis program funding. Beginning in FY 2017, newly issued FOAs for HIV and viral hepatitis prevention programs will include guidance on the use of funding to support SSP activities.
- Partnerships with CADA and Odyssey house help to provide additional referrals and resources to NOSAP participants.

### 2016 NOSAP Totals

<table>
<thead>
<tr>
<th>Category</th>
<th>Total</th>
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</thead>
<tbody>
<tr>
<td>Disposed</td>
<td>667,773</td>
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<tr>
<td>Given</td>
<td>684,181</td>
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<tr>
<td>Weekly Client Avg.</td>
<td>108</td>
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<tr>
<td>Unique Clients</td>
<td>1305</td>
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</table>
A brief history of NOSAP

- Hours expanded to 2-5pm Fridays
- Volunteers and cross-agency collaboration improved
- HB 250 passes in state legislature allowing local jurisdictions to “authorize local governing authorities to establish needle exchange programs”
- New Orleans updated Ordinance: “Notwithstanding any other provision of law, the provision of this Division shall not apply to a needle exchange program that has been expressly approved by the Council. The Council may, by resolution, approve the operations of such programs”

<table>
<thead>
<tr>
<th>Year</th>
<th>Disposed</th>
<th>Given</th>
<th>Weekly Client Avg.</th>
<th>Unique Clients</th>
</tr>
</thead>
<tbody>
<tr>
<td>2017</td>
<td>620,173</td>
<td>695,510</td>
<td>124</td>
<td>1579</td>
</tr>
</tbody>
</table>
A brief history of NOSAP

We are hoping to see:
• More resources
• New building
• New Hours
• New Funding
• New collaborations

Allison Vertovec, MPH
Prevention Programs Manager
CrescentCare
Allison.Vertovec@crescentcare.org
Trystereo New Orleans Harm Reduction Network was founded in 2011 by a small group of needle exchange providers, advocates, and drug users: Crow and Nora. Today we are strengthened by a network of allies who challenge stigma faced by people who use drugs and advocate for change.
The Problem

- Close to 19,000 Louisiana residents are arrested each year for drug-related offenses.
- Three drug-related convictions might send a person to the State Penitentiary for the rest of their life.
- Criminal records affect access to political representation, educational opportunities, housing, food, and jobs.
- Correctional policies damage health.
- Non-medical criminal justice workers make healthcare decisions for defendants and inmates.

Focus on Criminalization

- Fear of law enforcement is a major disincentive to:
  - Calling 911 for overdose.
  - Good Samaritan Law offers limited immunity to overdose victim and caller. Law enforcement actively pursues possession with intent to distribute and manslaughter arrests.
  - Talking honestly with a parent, friend, social worker, counselor, or physician about drug use
  - Keeping harm reduction tools on hand, like sterile syringes or condoms

You’re more likely to be arrested here than anywhere in America.
Applying harm reduction to our systems of governance!

- Promote justice and advancement for people of color, poor people, queer people, immigrants, youth, people most affected by environmental degradation, and other marginalized populations in our communities; prioritize the needs of these people above others.

- Favor the judicial candidates least destructive to the lives of the poor and others caught in the dragnet of our punitive legal system.

- Be strategic about New Orleanians’ specific needs being adequately addressed on the state and federal levels, especially with regard to environmental, economic, and healthcare concerns.

- Reject the influence of post-Katrina opportunism at all levels of government.

We approach this work with a harm reduction ethos—that is, we understand we cannot easily nor quickly move the mountains of inequality, prejudice, (bureaucracy!), and oppression that keep people down. We considered the view that deliberating on “Who is going to harm us?” is actually not a form of harm reduction at all. Ultimately, we believe we can work to ease the suffering and trauma that exist in our communities. In this way, we advance towards a visionary society in which everyone’s needs are met, and our values are reflected in our system of governance.

These guides start as working drafts, so expect updates as we continue to do research. Feel free to submit your contributions!
In Harm's Way
State Response to Sex Workers, Drug Users and HIV in New Orleans
Hey its i I found a good donation

And pharmacys deny me

: I'm desperate can u get them at pharmacy? Thursday. Do you know of any pharmacy that would sell me a few rigs

: I know I've tried And I was like... Don't we have safe access laws here? They were like, yea... But it's up to pharmacist

: Ok I've tried and been denied Saturday night or really any time as soon as possible would be great

Hey, sorry to bug you, but do you guys provide a list of 'sympathetic' pharmacies? I would rather do things that way than bug y'all all the time. Also if this is your personal number and you need me to fuck off and call the main line, just say the word

i got lucky with pharmacy on oak. Used a story about needing to give a pet allergy shots subcutaneous. Thank you so much. I appreciate and respect what y'all do...

I just moved here from California out there we can buy at pharmacy but not out here so it's getting really hard for me is there anyway I can get some today

The pharmacies won't sell then I tried

Got a donation for y'all, I'd go to a pharmacy but you know how that is

hey do you know any pharmacy friendly places to get rigs? Would you be able to give me any reference to a friendly pharmacy here in the city

Me: This hotline is not associated with is a separate organization. They don't offer a phone number, but that's a good piece of feedback to offer them next time you go.

I won't be going back there. I had 164 to turn in for safe disposal. The lady was closing the door and I said please, just let me drop them off.

I don't need anything in return" and she said, "it's 4:31 (which it wasn't. It was 4:29) and shut the door on my face while I was telling her that I wasn't asking for anything in return.

So now these are going in the dumpster and I will never return nor recommend anyone else go there. She didn't have to be rude.

Any pharmacies sell even one or two?

Need clean syringes ASAP, or maybe a pharmacy that will sell them to me? I live on FQ but can meet anywhere. Thanks
Thank You!
nolaharmreduction@gmail.com

Acknowledgements
Egan created some comics for us! http://jobcomics.blogspot.com/
Syringe Access Advocacy: Learning from Louisiana

Logan Kinamore
Open Health Care Clinic
Patient and Community Education Specialist: Harm Reduction
Baton Rouge, LA
Where We Are Now

- Federal law
- State law
- Baton Rouge municipal ordinance
How We Got Here

- Making progress in each legislative session
- Law enforcement in the loop
- Finding bi-partisan allies
- A whole lot of teamwork
Where We Want to Go

- Statewide authorization
- Explicit participant protections
- Paraphernalia decriminalization
- State and local funding and support
Barriers Faced on the Road

- Enabling?
  - Point to the evidence
- Law enforcement pushback
  - SAPs protect LEOs
- STIGMA