

SUBJECT: Pilot program for communicable disease harm-reduction programs

COMMITTEE: Public Health — committee substitute recommended

VOTE: 6 ayes — Gray, Coleman, Capelo, Longoria, Maxey, Uresti
1 nay — Delisi
1 present not voting — Wohlgemuth
1 absent — Glaze

WITNESSES: For — Sam Houston Knutson, American Liver Foundation; Carolyn Parker, Texas AIDS Network; Sharon Phillips, Hep C Advocate Network; Charles Thibodeaux; *Registered, But Did Not Testify*: Tom Banning, Texas Academy of Family Physicians; Susan Champion, AIDS Services of Austin, Inc.; Brad Lindgren; Jenny Young, Texas Medical Association
Against — None
On — Dr. Sharilyn Stanley, Texas Department of Health

DIGEST: **Harm Reduction Programs.** CSHB 288 would allow a local health authority or other organization with the approval of a local governmental entity to establish a harm reduction program to reduce the risk of AIDS, HIV, and Hepatitis B and C. In addition to offering referrals or services for other health-related issues, including other sexually transmitted diseases (STDs), tuberculosis testing, and general health care, a program would have to:

- ! be incorporated into existing disease prevention and outreach programs;
- ! provide free and anonymous exchange of used needles and syringes for an equal number of new needles and syringes;
- ! offer education on disease transmission and prevention;
- ! assist program participation in obtaining drug treatment and other health-related services; and
- ! provide materials to promote safe health-related practices, including use of bleach and sterile cotton.

Needle handling and distribution. The bill would authorize a person licensed as a wholesale drug or device distributor to distribute needles and syringes to a program authorized by this chapter. Program operators would have to store needles and syringes in a proper and safe manner. Only authorized program employees or volunteers would have access to the needles and syringes. Program clients would have to obtain needles and syringes only from an authorized program employee or volunteer.

Possession or delivery of drug paraphernalia. The bill would amend provisions in the Health and Safety Code that create an offense for possession or delivery of drug paraphernalia. The bill would create an exception for a manufacturer of needles or syringes delivered through a program. Also excepted would be the person who used, possessed, or delivered needles or syringes through a harm reduction program who could present identification showing that he or she was an employee, volunteer, or participant of the program.

Declaration of purpose and public interest. The bill's stated purpose would be to authorize programs to combat the spread of infectious and communicable diseases. The bill would declare that it is in the public interest to break the connection between injected drug use and the spread of infectious diseases by allowing legal access to clean needles and syringes as part of a comprehensive effort to curb the spread of diseases.

Data collection and reporting. The bill would require the Texas Department of Health (TDH) to enter into a memorandum of understanding with each program organizer to provide information to TDH on the effectiveness of the program. TDH would have to present a report to the Legislature evaluating the effectiveness of programs not later than January 31, 2005. The bill would require local organizations conducting harm reduction programs to assist TDH in preparing the report. These provisions would expire July 1, 2005.

The bill would take effect September 1, 2001.

SUPPORTERS
SAY:

CSHB 288 would help prevent the transmission of HIV and Hepatitis C through sharing of infected needles. There are approximately 73,000 injection drug users in Texas with Hepatitis C. In 1998, the Bureau of HIV

and STD Prevention at TDH reported that injected drug use was the second most-likely mode of transmission for HIV, with 31 percent of women and 14 percent of men contracting the virus through infected needles. Paraphernalia laws inhibit clean needle use by discouraging drug users from carrying their own needles.

This bill would not encourage drug use, but is aimed at reaching a largely inaccessible population. By reaching this population, programs could provide education and treatment options to people who otherwise might not receive them and would help reduce disease transmission.

Multiple studies have shown the effectiveness of harm-reduction programs to decrease the incidence of HIV, Hepatitis C, and AIDS, and to decrease drug use. Programs also improve referral to drug treatment programs. Because the programs would be set up through nonprofits and community organizations, they would not present a cost to the state.

OPPONENTS
SAY:

The state should not, under any circumstances, facilitate or otherwise sanction or encourage illegal behavior, either directly or indirectly through a program that would provide needles and syringes to drug abusers.

NOTES:

The committee substitute stipulated that a person would be excepted from certain offenses for use, possession, or delivery of needles or syringes through a harm reduction program only if the person presented an identification card showing the person was an employee, volunteer, or participant of the harm reduction program.