May 10, 2005

Ambassador Randall Tobias
Office of the United States Global AIDS Coordinator
US State Department
2201 C Street NW
Washington DC 20522

Dear Ambassador Tobias:

As the US increases its commitment to global HIV prevention efforts, we write to express our concern about recent reports that US officials have questioned the efficacy of needle exchange programs and sought to block support for needle exchange in United Nations resolutions and policy documents. As you know, the sharing of syringes by injection drug users is a major driver of the AIDS epidemic both in the United States and internationally. As researchers, practitioners and representatives of affected populations, we affirm the important role that needle exchange and other sterile syringe programs play in helping to avert the spread of HIV/AIDS.

Outside of Africa, an estimated one-third of new HIV infections are attributed to injection drug use. In some countries, the proportion is even higher. In Russia, as many as 1.2 million people are living with HIV, with 75 percent of new infections stemming from injection drug use. Injection drug use accounts for the majority of HIV/AIDS cases in Ukraine, all of the Baltic States, the Central Asian Republics, Indonesia, Nepal, Iran, and Pakistan. In China, Vietnam and Malaysia, the majority of those living with HIV are injection drug users. Often, the vast majority of those infected are under thirty. Injection driven HIV epidemics consistently spread faster than sexually transmitted epidemics such as those found in sub-Saharan Africa.

In the United States, according to the Centers for Disease Control and Prevention, 23 percent of new AIDS cases reported in 2003 were attributed to injection drug use and/or sex with an injection drug user. This percentage is higher for women and African American men. Of all cases diagnosed through 2003, 53 percent of cases among women and 43 percent among African American men were attributed to injection drug use or sex with an injection drug user.

As the US Public Health Service has noted, for injection drug users who cannot or will not stop using drugs, using sterile syringes remains the safest and most effective method of HIV prevention. Medically appropriate treatment remains out of reach to the vast majority of drug users who need it: in the United States, one of the world’s richest countries, over 80 percent of those needing treatment for drug abuse as of 2000, did not have access to it. At the same time, extensive evaluation and research has shown that sterile syringe programs can dramatically decrease the spread of HIV without increasing drug use. These programs can additionally provide a bridge to drug treatment services by offering clients with information and referrals to treatment providers. No fewer than seven federally-funded reviews and reports conducted by public health officials,
researchers and US government agencies have concluded that syringe exchange programs are effective, safe and cost effective.

The efficacy of syringe exchange has recently been affirmed by the US government’s top scientists. In an October 7, 2004 letter to Congress, Director of the National Institutes of Health Dr. Elias Zerhouni stated, “Research shows that SEPs [syringe exchange programs], when implemented as part of a comprehensive HIV/AIDS prevention strategy, can be an effective public health approach to reduce the spread of HIV and other blood borne pathogens in the community.” In an August 4, 2004 letter, Director of the National Institute on Drug Abuse Dr. Nora Volkow stated, “The majority of studies have shown that NEPs/SEPs [needle exchange programs/syringe exchange programs] are strongly associated with reductions in the spread of HIV when used as a component of comprehensive approach to HIV prevention… In addition to decreasing HIV infected needles in circulation through the physical exchange of syringes, most NEPs/SEPs are part of a comprehensive HIV prevention effort that may include education on risk reduction, and referral to drug addiction treatment, job or other social services, and these interventions may be responsible for a significant part of the overall effectiveness of NEPs/SEPs. NEPs/SEPs also provide an opportunity to reach out to populations that are often difficult to engage in treatment.”

In 2004, this consensus was reinforced by the World Health Organization (WHO), which stated that the available data “present a compelling case that needle and syringe programs substantially and cost effectively reduce the spread of HIV among injection drug users and do so without evidence of exacerbating injecting drug use at either the individual or societal level.” The WHO accordingly recommended that “authorities responsible for areas threatened by or experiencing an epidemic of HIV infection among IDUs (injection drug users) should adopt measures urgently to increase the availability and utilization of sterile injecting equipment and expand implementation to scale as soon as possible.”

As the single largest funder of global HIV/AIDS programs in the world, the US carries enormous influence in shaping global approaches to the epidemic. Even beyond its role as a donor, many look to the United States for guidance in the design and implementation of their programs. The fact that the United States remains the only country in the world to impose an explicit ban on federal funding of needle exchange already sets a poor example to other nations battling severe injection-driven HIV/AIDS epidemics. It is more critical than ever that US agencies communicate accurate information about needle exchange, faithfully represent the public health consensus supporting these programs, and refrain from standing in the way of countries, and organizations within its own borders, that wish to pursue this proven, effective method of prevention. With so many at risk for HIV, we need all the tools we have.

Sincerely,

amfAR, The Foundation for AIDS Research, New York, NY
GMHC, New York, NY
Harm Reduction Coalition, New York, NY
Housing Works, New York, NY
Human Rights Watch, New York, NY
North American Syringe Exchange Network, Tacoma, WA
Open Society Institute, New York, NY