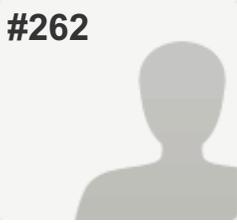


Ending the Epidemic Task Force Recommendation Form

#262



COMPLETE

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Q1: OPTIONAL: This recommendation was submitted by (please provide your first and last name, affiliation, and email address)

First Name	Julienne
Last Name	Verdi
Affiliation	Planned Parenthood of New York City
Email Address	Julienne.Verdi@ppnyc.org

Q2: Title of your recommendation Decriminalization of Syringe Possession

Q3: Please provide a description of your proposed recommendation

Planned Parenthood of NYC (PPNYC) urges the Task Force to push for greater decriminalization of syringe possession. We recommend removing current penal code exemptions to ensure no person is arrested for possessing a new syringe. Current restrictive penal codes and law enforcement practices put drug injectors in danger of arrest and prosecution, potentially causing individuals to be afraid of using syringe access and disposal programs.

As a trusted sexual healthcare and harm reduction provider in New York City, PPNYC is committed to ensuring all New Yorkers feel protected in taking steps necessary to safeguard their health in the manner that is right for them. Our HIV prevention and access to care program distributes syringes via an Article 28 Mobile Medical Unit in locations throughout the South Bronx, northern Manhattan and central Brooklyn; last year alone, Project Street Beat staff engaged in almost 23,000 STI and HIV prevention-related outreach encounters with women, men, and youth on the streets of New York City. We know firsthand that syringe exchange programs (SEPs) have proven effective in reducing HIV transmission among injection drug users (IDUs), and have been critical in the overall decline of New York's HIV transmission rate.

However, there continues to be a strong racial and economic divide in the prevalence of HIV and AIDS in New York. Stronger attention must be paid to the structural barriers that impact a person's likelihood to contract the disease, as transmission rates are significantly higher among Black and Latino and low-income New Yorkers. These communities also face disproportionately high rates of arrest and incarceration, making it likely that certain drug criminalization measures have an impact on people's access to syringe exchange programs. Law enforcement practices are often inconsistent with the 2010 changes to the law, subjecting individuals to harassment or undue charges of syringe possession. Structural interventions that provide law enforcement education and training on syringe access laws, as well as further decriminalization current exemptions would remove barriers to care for many high-risk residents and would go a long way in tackling the underlying causes that have created such stark health disparities.

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Q4: For which goal outlined in the Governor's plan to end the epidemic in New York State does this recommendation apply? (Select all that apply)

Other (please specify) Prevention and safety

Q5: This recommendation should be considered by the following Ending the Epidemic Task Force Committee (Select all that apply)

Prevention Committee: Develop recommendations for ensuring the effective implementation of biomedical advances in the prevention of HIV, (such as the use of Truvada as pre-exposure prophylaxis (PrEP)); for ensuring access for those most in need to keep them negative; and for expansion of syringe exchange, expanded partner services, and streamlined HIV testing by further implementing the universal offer of HIV testing in primary care, among others. The Committee will focus on continuing innovative and comprehensive prevention and harm reduction services targeted at key high risk populations, as well as grant-funded services that engage in both secondary and primary prevention.

Care Committee: Develop recommendations to support access to care and treatment in order to maximize the rate of HIV viral suppression. The Committee will promote linkages and retention in care to achieve viral suppression and promote the highest quality of life while significantly decreasing the risks of HIV transmission. Recommendations will also ensure a person centered approach is taken and that access to culturally and linguistically appropriate prevention and health care services is available.

Q6: Does this recommendation require a change to an existing policy or program, or the creation of a new policy or program?

Change to existing policy

Q7: Would implementation of this recommendation be permitted under current laws or would a statutory change be required?

Statutory change required

Q8: Is this recommendation something that could feasibly be implemented in the short-term (within the next year) or long-term (within the next three to six years)?

Within the next year

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Q9: What are the perceived benefits of implementing this recommendation?

New York State has recognized the importance of decriminalizing syringes in its 2010 changes to the law; restricting access to clean needles has not been proven to lower usage rates, but instead only encourages users to re-use or share contaminated needles and diminishes the benefits of syringe access programs. Remaining statutes that exclude New Yorkers from obtaining syringes create obstacles to care and discourage behavior the state advocates for in its attempt to end the AIDS epidemic. From a health provider standpoint, decriminalizing the use of syringes would protect New Yorkers from harmful drug laws and support improved public health.

Q10: Are there any concerns with implementing this recommendation that should be considered?

None.

Q11: What is the estimated cost of implementing this recommendation and how was this estimate calculated?

None.

Q12: What is the estimated return on investment (ROI) for this recommendation and how was the ROI calculated?

The estimated return on investment can be calculated by the increased use of clean syringes among profiled communities, understanding that the effective use of syringe access and disposal programs has been proven to significantly lower incidence rates of HIV.

Q13: Who are the key individuals/stakeholders who would benefit from this recommendation?

The key individuals/stakeholders who would benefit from decriminalizing the personal possession of syringes include those most commonly profiled and arrested for carrying drug paraphernalia, including men and women of color. From a public health perspective, New York State as a whole would benefit if at risk populations felt safe to access clean syringes without fear of repercussions. The more common usage of syringe access and disposal programs will help lower the rates of new infections throughout the State.

Q14: Are there suggested measures to accompany this recommendation that would assist in monitoring its impact?

Suggested measures to assist in monitoring the impact of improved syringe decriminalization include measures to facilitate data collection on syringe access including numbers distributed by organizations working with at risk communities through harm reduction interventions.

Q15: This recommendation was submitted by one of the following Advocate