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POLICY WITH A POINT:  
CLEAN NEEDLES FOR DRUG ADDICTS

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We need better ways to provide clean needles to injecting drug users because this is a major way of reducing the spread of blood borne diseases, primarily HIV/AIDS and Hepatitis C, which is the most deadly variant of hepatitis. We know that this works. There have been major scientific studies all over the world, eight of them in the United States, and they have unanimously, without exception, shown that needle exchange programs, greater access to sterile syringes, reduces the spread of disease without encouraging or increasing drug abuse.

### **A Political and Moral Dilemma**

I think one of the reasons that politicians have tended to ignore this, or to reject is, is that the people who are most affected by these disease don't have much voice. They're not going to raise much opposition, they don't have people in their corner fighting for them to a great extent. So it's easy to ignore them. Part of the resistance, I think, is that politicians feel they'll be vulnerable at election time, because an opponent will say, well this person voted to encourage drug abuse. But I think part of it is people genuinely feel that this will be condoning drug usage, and that it sends the wrong message. But what we ought to think about is the message we now send. We know a way to dramatically reduce the chances that you will become infected and spread this disease to other people. It will also dramatically reduce the cost that society is going to have to spend on you. But because we believe what you are doing is illegal, immoral, and sinful, we're not going to do what we know works. As upright, moral, perhaps sincerely religious people, we prefer that you and those in your social circle die. That's the message we now send.

### **Hepatitis C & HIV/AIDS: Both Blood Borne Diseases**

Generally the incidence of hepatitis C is about six times that of HIV/AIDS, it's much easier to catch – the virus will live on an infected needle for about four days. The reason it's important to consider both HIV/AIDS and hepatitis C together is that, even though they're different diseases, both of them are blood-borne diseases. They are spread from the blood of one person to the blood of another. That blood is spread commonly, among injecting drug users, on the needles, and the hepatitis C virus, for example, can live for four days on a needle. So if someone uses a

needle, and even up to four days later, uses that needle after trying to sterilize it, there is still a good chance it's going to carry that disease.

### **Where Texas Ranks**

Texas ranks fourth in the United States in having the numbers of HIV/AIDS cases with 56,000 currently. Some say it's more than that, but at least that many. This is not a race we want to win. It also is extraordinarily expensive – from 2001 to 2005 Texas spent 316 million dollars just on Medicaid funds in the treatment of HIV/AIDS. That doesn't include private payers, private insurance, Veterans Administrations, Civil Service, or any other forms – it's extraordinarily expensive.

### **Australia's Experience: A Model for Texas**

Australia, two or three years ago, issued a report, in which they studied not only their own country, but they had surveyed 103 cities, some without and some with needle exchange programs. They found that in cities without needle exchange programs the incidence of HIV/AIDS increased annually 18%. In cities with these programs, they decreased annually about 8%. Australia and Texas have approximately the same populations, and almost exactly the same number of injecting drug users, about a hundred thousand each. We have 56,000 cases of HIV/AIDS in Texas, 14,000 in Australia.

### **Needle Exchange Programs: Good Public Policy**

No responsible person wants to encourage drug abuse. No fiscally prudent person wants to spend money unnecessarily. No compassionate person wants to consign people unnecessarily to a life of living hell or to death. Fortunately by providing people with greater access to sterile needles, we can be both rational, prudent and compassionate. Those are admirable criteria for good public policy.