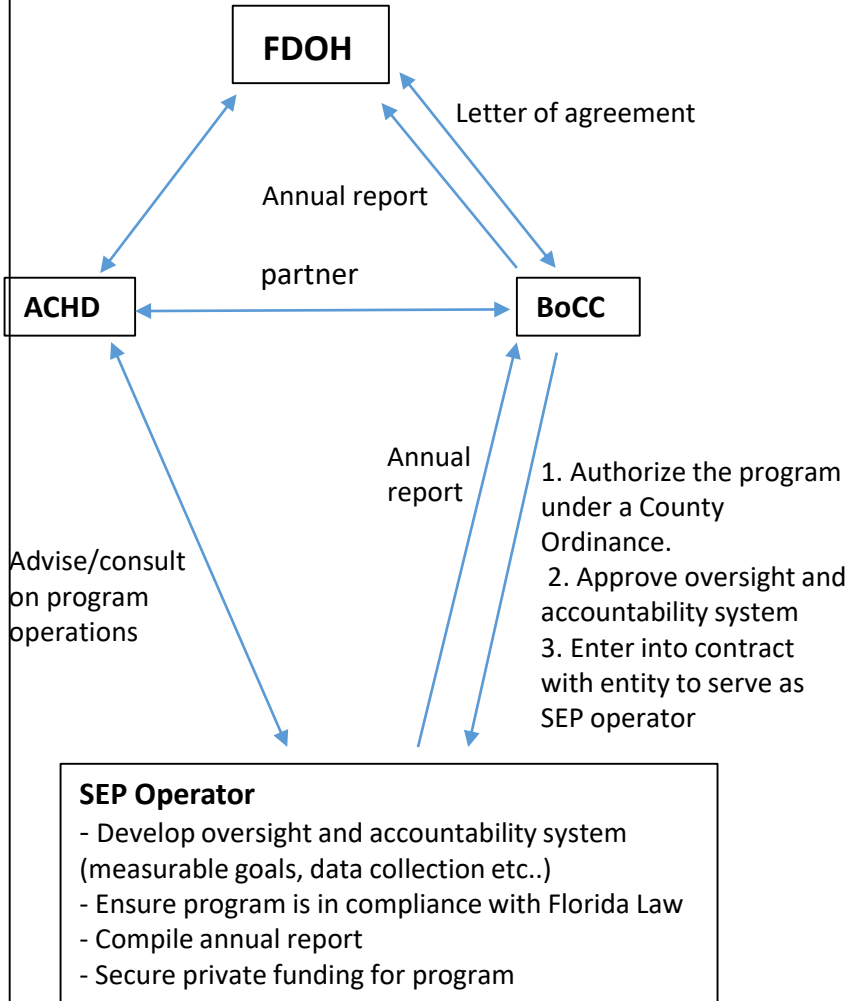


Syringe Exchange Programs (SEPs): Nuts and Bolts

Process:



SEP Required Components :

1. One sterile syringe given for every used one collected (i.e. 1:1)
2. Offer educational materials on HIV/AIDS, viral hepatitis and other blood borne illness
3. Provide on-site counseling or referrals for drug abuse education and treatment
4. Provide on-site screening or referrals for HIV and viral hepatitis testing/treatment
5. Make naloxone kits available or refer to programs that can provide such kits

FAQs:

Q: Do SEPs reduce drug use?

A: Yes, IVDUs who use an SEP are more likely to stop injecting compared to those who do not (3x more likely to reduce or stop use and 5x more likely to enter treatment)

Q: Do SEPs increase needles in public places?

A: No, SEPs protect the public by providing safe disposal and reducing the presence of needles in the community

Q: Do SEPs lead to more crime and/or drug use?

A: No, crime does not go up and actually IVDU goes down

Q: Do SEPs reduce infections?

A: Yes, multiple studies show a reduction in HIV risk.

Q: Do SEPs save money?

A: Yes, through prevention of chronic infections and early intervention on acute infections (through wound care services)

Q: How are SEPs funded?

A: In Florida, they must be privately funded. Fortunately, there are many private foundations that specifically fund SEPs in addition to individual donors. Partnerships with health care organizations or industry are possible as well.

Q: Can't unused syringes be purchased from retail pharmacies without the need for SEPs?

A: Yes, however many pharmacies require evidence of a diabetes diagnosis and can also simply refuse to sell them to individuals based on their own discretion. Thus, SEPs are still needed for the IVDU population.