



Evaluation of a peer-run “unsanctioned” syringe exchange program shows benefits to public health

What is the study **about**?

- Studies have shown that in Vancouver, difficulty accessing syringes at night is associated with HIV risk behaviour, such as syringe sharing, among people who inject drugs (IDU).
- By providing IDU with access to clean needles, the spread of HIV is greatly reduced. Needle exchange programs (NEPs) also promote safe disposal of used syringes.
- Between September 2001 and May 2002, the drug user organization VANDU (Vancouver Area Network of Drug Users) operated an all-night needle exchange program on a street corner in the heart of the Downtown Eastside drug scene.
- The purpose of this study was to describe the VANDU NEP and the people who used it.

How was the study **conducted**?

- 587 participants in the Vancouver Injection Drug Users Study were asked if they had obtained syringes from the VANDU exchange.
- We compared IDU who reported using this source to IDU who did not report using this source.

What did the study **find**?

- 28% of IDU reported getting syringes from the VANDU exchange in the previous six months.
- The VANDU peer-run NEP was shown to have reached IDU at high risk of HIV infection.
- The program also appeared to be promoting higher rates of safe syringe disposal.

The study asked:

Who used the VANDU peer-run NEP?

The study found:

The VANDU exchange reached IDU at high risk of HIV infection and increased the rate of safe syringe disposal among IDU.

Drug user organizations can play an important role in reducing harm among peers with harm reduction services.

Implications for policy: Why is the study **important**?

Importance of the role of drug user organizations

- Drug user organizations can play an important role in reducing harm among peers by reaching those at the highest risk of HIV infection with harm reduction services.

Consideration of other methods for NEPs

- Other forms of syringe exchange programs should be considered, such as the fixed night-time service that the VANDU exchange offered, and peer-run NEPs.

Wood E, Kerr T, Spittal PM, Small W, Tyndall MW, O’Shaughnessy MV, Schechter MT. **An external evaluation of a peer-run “unsanctioned” syringe exchange program.** *Journal of Urban Health*, 2003; 80(3): 455-464.