JOSH GREEN, M.D. GOVERNOR OF HAWAII KE KIA'ÄINA O KA MOKU'ÄINA 'O HAWAI'I



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## Testimony in SUPPORT of SB1433 RELATING TO HARM REDUCTION.

## SENATOR JOY SAN BUENAVENTURA, CHAIR SENATE COMMITTEE ON HEALTH AND HUMAN SERVICES

Hearing Date: February 3, 2025 @ 1:00 PM

Room Number: 225

1 Fiscal Implications: none.

- 2 **Department Position:** The Department SUPPORTS this measure to improve the effectiveness of
- 3 the State's syringe exchange program.

Department Testimony: For more than thirty years, Hawaii's state-funded syringe exchange 4 program has improved public health by reducing the incidence of bloodborne infections related 5 to injection drug use and has been effective in supporting people who inject drugs to improve 6 their health. Syringe exchange programs prevent HIV, hepatitis C, and other bloodborne 7 8 infections, are cost effective, reduce drug use and drug overdoses, protect the public and first 9 responder by providing safe syringe disposal, and do not cause or increase illegal drug use or 10 other crime. While syringe exchange has been a highly effective public health intervention in 11 Hawai'i, the statutory changes proposed in this measure would allow critical improvements, 12 increasing the effectiveness and impact of the program. The most important provision in this bill would permit the program to change from a strict one-13

14 to-one exchange model to a need-based distribution model. In the decades since the Hawai'i

15 program began, research has found that one-to-one exchange is less effective than needs-

- 16 based syringe distribution. Beginning in 2020, CDC has supported needs-based approaches to
- 17 syringe distribution because they are more effective in reducing new HIV and viral hepatitis

infections as compared to restrictive one-to-one distribution. Under the current strict one-to-1 2 one model, the syringe exchange must restrict syringe access by limiting the number of sterile syringes and needles an individual can receive to the number of used syringes and needles they 3 have to return. Some syringes exchange participants, despite making a concerted effort to 4 5 reduce their risk of contracting or transmitting bloodborne infections by accessing syringe exchange, are left without enough syringes and needles to use new sterile equipment each 6 7 time they inject. The syringe exchange program is required to refuse syringes and needles to 8 program participants whose syringes and needles have been lost, stolen, or confiscated. 9 Restricting access to syringes and needles in this way does not prevent people from injecting drugs, it simply prevents them from using sterile equipment. Once common, one-to-one 10 syringe exchange program across the country have transitioned to needs-based models. The 11 only U.S. states that still impose strict one-to-one limits on syringe exchange are Florida and 12 Hawai'i. 13

While the current statute permits the syringe exchange program to provide sterile syringes and needles, this measure would also permit distribution of other items used in the preparation and consumption of illegal drugs, when the department determines that distributing such items is important for preventing injury, overdose and transmission of bloodborne infections.

This measure would also provide limited legal protections to ensure that program staff have adequate legal protections for performing their job duties and to provide legal protection to program participants to bring used injection equipment to the program for proper disposal.

21 Offered Amendments: None.

22 Thank you for the opportunity to testify on this measure



## **TESTIMONY IN SUPPORT OF HB 1433**

| то:   | Chair San Buenaventura, Vice Chair Aquino, & HHS Committee Membe |  |  |  |
|-------|--|--|--|--|
| FROM: | Nikos Leverenz<br>Policy & Advancement Manager                   |  |  |  |
| DATE: | February 3, 2024 (1:00 PM)                                       |  |  |  |

Hawai'i Health & Harm Reduction Center (HHHRC) **strongly supports** HB 1433, which better aligns the state's syringe services program with best practices, including the repeal of a one-to-one limit outlined in the enabling statute (HRS §325-111 *et seq*.). The changes in this bill will help better facilitate harm reduction services delivery across the state.

Syringe access is a critical component of the state's longstanding public health centered approach to HIV and other infectious diseases, including viral hepatitis. For over three decades, Hawai'i's statewide syringe services program has effectively kept HIV transmission rates low among persons who use drugs and their intimate partners. The program currently operates through mobile units, appointments, and fixed sites on O'ahu, Kaua'i, Maui, and Hawai'i Island. Participants have access to overdose prevention supplies, safer sex supplies, no-cost HIV and HCV screenings and follow up care, and referrals that can assist with access to medical insurance and sustained medical care, including behavioral health treatment.

The latest annual report, required by law, <u>may be found on our website</u>. As the report notes, the program "continues to find innovative ways to provide needed services in the field. [In] August 2021, HHHRC launched its <u>Medical Mobile Unit</u>, bringing quality on-the-spot medical care and social services directly to underserved communities throughout O'ahu, such as HIV and HCV testing, wound care, naloxone training, and syringe exchange."

HHHRC's mission is to reduce harm, promote health, create wellness, and fight stigma in Hawai'i and the Pacific. We work with many individuals impacted by poverty, housing instability, and other social determinants of health.

Mahalo for the opportunity to provide testimony.

## <u>SB-1433</u> Submitted on: 1/31/2025 8:34:24 PM Testimony for HHS on 2/3/2025 1:00:00 PM

| Submitted By  | Organization | <b>Testifier Position</b> | Testify                   |
|---------------|--------------|---------------------------|---------------------------|
| Thaddeus Pham | Individual   | Support                   | Written Testimony<br>Only |

Comments:

Aloha Chair San Buenaventura, Vice Chair Aquino, and Committee Members,

As a public health professional with over 15 years of local experience, I write in **STRONG SUPPORT of SB1433**, which would enhance current syringe exchange laws to be more effective for public health.

Evidence shows that needs-based exchange is a vital strategy to reduce communicable diseases and also increase engagement with social services among people who use drugs. This allows providers to not only prevent diseases like HIV and hepatitis, but also build connections for addressing other urgent health issues, including overdoses, substance use, and houselessness.

I volunteer at our local syringe exchange in Chinatown monthly, and I can attest that people who seek services there care deeply about their health. As found in a recent Department of Health report (https://health.hawaii.gov/harmreduction/people-who-use-drugs-talk-about-hep-c), syringe exchanges in Hawai'i serve as important health hubs for hard-to-reach communities.

The success of our local syringe exchanges is demonstrated by over 30 years of homegrown efforts in disease prevention, service connection, and community partnerships, including with law enforcement. Please support this bill to ensure that these successes continue, and even increase, local impact for health.

Mahalo,

Thaddeus Pham (he/him)

Makiki, HI