
A BILL FOR AN ACT

RELATING TO HARM REDUCTION.

BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF HAWAII:

1 SECTION 1. The legislature finds that sharing injection
2 equipment among individuals who use drugs is a major
3 contribution to the spread of human immunodeficiency viruses,
4 hepatitis B, hepatitis C, and other serious bloodborne
5 infections. Act 152, Session Laws of Hawaii 1992, authorized
6 the establishment of the first state-funded sterile needle and
7 syringe exchange program in the United States. The program has
8 aimed to prevent the transmission of bloodborne pathogens and to
9 provide individuals who inject drugs with services such as
10 referrals to appropriate health and social services, thereby
11 reducing overall disease burden in Hawaii.

12 Over the past thirty years, extensive scientific research
13 has confirmed that syringe exchange programs nationwide
14 effectively reduce disease transmission, increase access to
15 addiction treatment, improve public safety, lower healthcare
16 costs, and do not lead to an increase in drug use or crime.
17 Research has also helped identify the most effective approaches

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1 in what are now commonly referred to as "syringe services
2 programs."

3 A 2020 report by the Centers for Disease Control and
4 Prevention, United States Department of Health and Human
5 Services, concluded that syringe programs that restrict syringe
6 distribution to one-to-one exchange are less effective than
7 needs-based distribution programs that provide sterile needles
8 and syringes to syringe exchange participants in quantities
9 sufficient to reduce the likelihood of needles and syringes
10 being shared or reused. The Centers for Disease Control and
11 Prevention supports needs-based approaches to syringe
12 distribution based on evidence that it is the best practice for
13 reducing new HIV and viral hepatitis infections. The Centers
14 for Disease Control and Prevention concludes that, compared to
15 one-to-one exchanges, needs-based syringe distribution results
16 in less syringe sharing and reuse, lower risk of infection, and
17 is not associated with increased unsafe syringe disposal.
18 Research shows that syringe distribution programs are safe,
19 effective, cost-saving, do not increase drug use or crime, and
20 do not cause people to begin injecting drugs. However, Hawaii
21 and Florida remain the only states that impose a strict one-to-
22 one sterile needle and syringe exchange limit. This Act will

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1 authorize the State's syringe exchange program to transition
2 from a one-to-one exchange model to a needs-based distribution
3 system.

4 Syringes and needles are not the only injection equipment
5 that contribute to the spread of infection. Any materials used
6 in the preparation or administration of drugs may potentially
7 transmit pathogens or cause injury when shared or reused.

8 The Model Syringe Services Program Act, released by the
9 White House Office of National Drug Control Policy in December
10 2021, recommends extending protection from criminal liability
11 under drug paraphernalia statutes to syringe program staff,
12 volunteers, and participants while implementing or accessing
13 program services intended to reduce transmission of bloodborne
14 infections. This Act makes amendments consistent with those
15 recommendations.

16 In alignment with recommendations for improving
17 effectiveness, the State's sterile needle and syringe exchange
18 program also facilitates access to critical health services
19 necessary for participants. These include educating
20 participants about the dangers of contracting human
21 immunodeficiency virus through sharing drug injection equipment
22 and offering counseling services and referrals for treatment of

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1 substance use disorders. Furthermore, individuals who do not
2 inject drugs but are marginalized often seek harm reduction
3 information, supplies, and referrals to other services through
4 the program. This Act will remove the requirement that the
5 program exclude non-injection drug users, ensuring the program
6 can assist individuals in need when resources are available.

7 Syringe services programs also play a crucial role in
8 collecting and safely disposing of used injection equipment.
9 Safe disposal occurs most effectively if program participants
10 batch all used injection equipment for safe disposal by syringe
11 services programs. However, participants may be reluctant to
12 batch used injection equipment for safe disposal if they risk
13 criminal penalties for drug residue found on used equipment.
14 Extending protection to program participants from arrest and
15 prosecution for possession of drug residue on used syringes and
16 needles will increase the likelihood of proper disposal, thereby
17 reducing public health risk. Program staff regularly encourage
18 participants to batch and return all used injection equipment to
19 the syringe exchange program, not only for the safety of the
20 community, but also to assist in ensuring the program's
21 continuity. For these reasons, the Model Syringe Services
22 Program Act recommends providing immunity from criminal

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1 penalties for possession of a controlled substance or other
2 illicit drug due to the presence of residue in a hypodermic
3 needle or syringe or other supplies.

4 The purpose of this Act is to improve the safety,
5 effectiveness, and cost savings of the State's sterile needle
6 and syringe exchange program by amending it based on current
7 recommendations from the Centers for Disease Control and
8 Prevention and the White House Office of National Drug Control
9 Policy's model legislation.

10 SECTION 2. Section 325-111, Hawaii Revised Statutes, is
11 amended as follows:

12 1. By adding five new definitions to be appropriately
13 inserted and to read as follows:

14 "Authorized objects" means objects authorized by the
15 department, by rule, for dissemination to syringe exchange
16 participants for the purpose of reducing infection or injury.

17 "Authorized objects" may include, but are not limited to,
18 cookers, cottons, or ties.

19 "Needs-based distribution" means a syringe distribution
20 practice that provides sterile needles and syringes to syringe
21 exchange participants in quantities sufficient to reduce the
22 likelihood of needles and syringes being shared or reused.

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1 "Program staff" means an employee of the department or its
2 designee who is specifically tasked with procuring, handling,
3 transporting, and providing sterile needles, syringes, and
4 authorized objects and services to syringe exchange
5 participants.

6 "Residue" means any controlled substance, as the term is
7 defined in section 329-1, in an amount less than 0.05
8 milliliter.

9 "Syringe exchange participant" means an injection drug user
10 who receives a sterile needle and syringe pursuant to the
11 program."

12 2. By repealing the definition of "participant".

13 ~~["Participant" means an injection drug user who exchanges~~
14 ~~a sterile needle and syringe unit pursuant to the program."]~~

15 SECTION 3. Section 325-113, Hawaii Revised Statutes, is
16 amended to read as follows:

17 "[+]§325-113[+] **Operation of the program.** (a) The
18 program shall be operated for the purpose of:

- 19 (1) Preventing the transmission of the human
20 immunodeficiency virus, the hepatitis B virus, the
21 hepatitis C virus, and other ~~[blood borne diseases,]~~
22 bloodborne infections; and

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(2) Providing ~~[injection]~~ drug users with referrals to appropriate health and social services.

(b) The program shall provide for maximum security of exchange sites and equipment, including a full accounting of the number of needles and syringes ~~[in use,]~~ distributed, the number in storage, the number of used needles and syringes collected, and any other measure that may be required to control the use and dispersal of sterile needles and syringes; provided that a syringe exchange participant may exchange used needles and syringes at any exchange site if more than one site is available.

(c) The program shall provide ~~[for a one-to-one exchange, whereby the participant shall receive one sterile needle and syringe unit in exchange for each used one.]~~ needs-based distribution of sterile needles and syringes.

(d) The program ~~[shall provide procedures for the screening of participants to prevent non-injection drug users from participating in the programs.]~~ may provide screening procedures to allow non-injection drug users to safely and effectively receive services, exclusive of syringes and needles, from the program.

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(e) The department and its designees shall keep records to identify and authorize [~~persons employed by the department or its designees~~] program staff to have access to needles, syringes, or authorized objects, and the program's records.

(f) The program shall include services to:

(1) Educate the syringe exchange participant about the dangers of contracting [~~HIV infection~~] bloodborne pathogens through [~~needle-sharing~~] needle- and other materials-sharing practices; and

(2) Offer substance [~~abuse~~] use disorder treatment referral and counseling services to all non-injection drug users and syringe exchange participants.

(g) The program shall compile research data on behavioral changes, enrollment in [~~drug abuse~~] substance use disorder treatment, counseling, and education programs, service provision, disease transmission, and other information that may be relevant and useful to assist in the planning and evaluation of efforts to combat the spread of [~~blood borne diseases~~] bloodborne infections."

SECTION 4. Section 325-114, Hawaii Revised Statutes, is amended to read as follows:

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1 " ~~[†] §325-114 [†]~~ ~~[Criminal liability.]~~ Liability.

2 (a) ~~[Exchanges under the sterile needle and syringe exchange~~
3 ~~program]~~ Possession or delivery of needles or syringes shall not
4 constitute an offense under section 329-43.5 for ~~[the~~
5 ~~participant or for the employees of the department or its~~
6 ~~designees.]~~ program staff acting in the course and scope of
7 official duties; provided that delivery is limited to other
8 program staff or to syringe exchange participants pursuant to
9 this part. Possession of needles or syringes shall not
10 constitute an offense under section 329-43.5 for syringe
11 exchange participants participating in a program visit.

12 (b) Possession or delivery of authorized objects shall not
13 constitute an offense under section 329-43.5 for program staff
14 acting in the course and scope of official duties; provided that
15 delivery is limited to other program staff or to syringe
16 exchange participants pursuant to this part. Possession of
17 authorized objects shall not constitute an offense under section
18 329-43.5 for syringe exchange participants participating in a
19 program visit. The department shall establish, by rule, a
20 specific list of authorized objects, which may be updated from
21 time to time as needed.

1 (c) Possession or delivery of used needles or syringes
2 containing residue shall not constitute a drug possession
3 offense under section 712-1242(1)(c), 712-1243, 712-1245(1)(c),
4 712-1246.5, 712-1248(d), or 712-1249, for syringe exchange
5 participants within month after their last participation in
6 a program visit; and shall not constitute such an offense for
7 program staff acting in the course and scope of official duties;
8 provided that any delivery, whether by syringe exchange
9 participants or by program staff, shall be made only to program
10 staff pursuant to this part.

11 (d) Subsections (a), (b), and (c) shall only apply to
12 needles, syringes, or authorized objects possessed by syringe
13 exchange participants or program staff; or to needles, syringes,
14 or authorized objects delivered between program staff, or
15 between a syringe exchange participant and program staff.
16 Subsection (a), (b), or (c) shall not apply to any needles,
17 syringes, or authorized objects possessed by anyone other than
18 syringe exchange participants or program staff, nor shall these
19 exceptions apply to any needles, syringes, or authorized objects
20 delivered between syringe exchange participants, between a
21 syringe exchange participant and an individual who is neither a
22 syringe exchange participant nor program staff, between

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1 individuals who are neither syringe exchange participants nor
 2 program staff, or between such an individual and program staff.

3 (e) A law enforcement officer who, acting in good faith,
 4 arrests or charges a person who is thereafter determined to be
 5 exempt from an offense pursuant to this section shall not be
 6 subject to civil liability for the mere arrest or filing of
 7 charges.

8 ~~[(b) Nothing]~~ (f) Except as specifically provided in this
 9 section, nothing in this part provides immunity from prosecution
 10 to any person for violation of any law prohibiting or regulating
 11 the use, possession, dispensing, distribution, or promotion of
 12 controlled substances, dangerous drugs, detrimental drugs, or
 13 harmful drugs. [Nothing] Except as specifically provided in
 14 this section, nothing in this part provides immunity from
 15 prosecution to any person for violation of [sections] section
 16 329-41, 329-42, or 712-1241 through [712-1249.6.] 712-1249.7."

17 SECTION 5. Section 325-116, Hawaii Revised Statutes, is
 18 amended to read as follows:

19 "[+]§325-116[+] **Reports.** The department, on or before
 20 January 1 of each year, shall submit a report to the oversight
 21 committee. The report shall include:

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- (1) Information as to the number of syringe exchange participants served [~~and~~], the number of needles and syringes distributed[+], and the number of used needles and syringes collected;
- (2) A demographic profile of the syringe exchange participants served, including but not limited to: age, sex, ethnicity, area of residence, occupation, types of drugs used, length of drug use, and frequency of injection;
- (3) Impact of the program on needle and syringe sharing and other high risk behavior;
- (4) Data on syringe exchange participants regarding HIV testing, counseling, drug treatment, and other social services, including referrals for HIV testing and counseling and for [~~drug abuse~~] substance use disorder treatment;
- (5) Impact on the transmission of HIV infection among injection drug users;
- (6) Impact on behaviors that caused syringe exchange participants to be at risk for HIV transmission such as frequency of drug use and needle sharing;

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- (7) An assessment of the cost-effectiveness of the program versus direct and indirect costs of HIV infection; and
- (8) Information on the percentage of persons served through treatment programs for injection drug users funded through the department that were attributed to needle exchange referrals.

The report shall address the strengths and weaknesses of the program, the advisability of its continuation, amendments to the law, if appropriate, and other matters that may be helpful to the oversight committee in evaluating the program's efficacy."

SECTION 6. Statutory material to be repealed is bracketed and stricken. New statutory material is underscored.

SECTION 7. This Act shall take effect upon its approval.

INTRODUCED BY:

Nedra K. Harman

BY REQUEST

JAN 21 2025

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Report Title:

Department of Health; Sterile Needle and Syringe Exchange Program; Needs-Based Distribution; Non-Injection Drug User Participation; Liability

Description:

Repeals the one-to-one syringe limit for the needle exchange program. Authorizes the Sterile Needle and Syringe Exchange Program to provide needs-based distribution. Authorizes non-injection drug user participation in the Program. Modifies liability for exchange program participants, staff, and law enforcement officers.

The summary description of legislation appearing on this page is for informational purposes only and is not legislation or evidence of legislative intent.

JUSTIFICATION SHEET

DEPARTMENT: Health

TITLE: A BILL FOR AN ACT RELATING TO HARM REDUCTION.

PURPOSE: To authorize the State's sterile needle and syringe exchange program to transition from one-to-one exchange to needs-based distribution; authorize non-injection drug user participation in the program; and modify liability for the program participants, staff, and law enforcement officers.

MEANS: Amend sections 325-111, 325-113, 325-114, and 325-116, Hawaii Revised Statutes.

JUSTIFICATION: Compared to one-to-one syringe programs, needs-based syringe distribution is associated with less sharing of syringes, less reuse of syringes, lower risk of infections, and is not associated with increased odds of unsafe syringe disposal.

Permitting the program to provide non-injection drug users with harm reduction information, harm reduction supplies, and referrals to other health and social services can improve the health of non-injecting drug users and protect public health.

Liability protections for the program participants, staff, and law enforcement officers are added or modified to increase the likelihood that injection drug users will use the program, thereby decreasing sharing, reuse, and unsafe disposal of used syringes and needles, and decreasing risk of transmission of human immunodeficiency viruses, hepatitis B, hepatitis C, and other serious bloodborne infections.

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Impact on the public: Improved protective factors against infectious diseases.

Impact on the department and other agencies:
None.

GENERAL FUND: None.

OTHER FUNDS: None.

PPBS PROGRAM
DESIGNATION: HTH 100.

OTHER AFFECTED
AGENCIES: None.

EFFECTIVE DATE: Upon approval.