

This is Lieutenant Roger McCort of The Salvation Army for today's Community Comment.

I noted with some interest that Republican leaders in Congress slipped language into last month's omnibus spending bill effectively reinstating federal funding for needle exchange programs. I say effectively because the needles themselves still cannot be paid for by federal funds, even though the space, lights, staff, vehicles, disposal, promotional materials, and any other supplies required to operate a needle exchange all can be.

In short, federally speaking, we fully support the idea and practice of trading out used needles for sterile ones, but we want to say we don't do it.

This approach is almost as confusing as the concept itself. Harm reduction programs like these are predicated on the hope that providing someone with a way to hurt themselves in a safer manner / will somehow lead to the voluntary victims of drug abuse making better choices about their health and well-being in the future. In a recent North Coast Journal article, one proponent is quoted as saying that every dollar spent here saves four dollars in later public health costs.

Opponents of needle exchanges are quick to point out that greater cost savings can be achieved through avoiding drug use than from cleaner drug use. They also point out the mixed message inherent in warning people about the health hazards of illegal drugs while handing out the means to use them better.

From my background working with people struggling with addiction and recovery, I tend to agree that harm reduction doesn't always accomplish what it sets out to do. In fact, it may be a factor in someone continuing to live in their addiction because of their perception that they are being helped, encouraged, or even treated by participating in such a program.

But...

Needle exchanges aren't really about treating addictions to needle drugs like opiates, heroin, or amphetamines. They are about treating and preventing the spread of diseases such as HIV/AIDS and Hepatitis in all its forms. They are about treating the epidemic of discarded sharps on the streets and rusty needles abandoned in our parks where inquisitive children might pick them up. They also tend to reduce the number of law enforcement officers getting stuck by old, uncapped needles during pat downs. In these areas, exchanges are highly effective.

While working in inner city ministry in San Francisco I helped provide sandwiches for the local Exchange to hand out to clients. One night on our way in, a volunteer asked if the program was worthwhile.

Just then, we passed a young addict digging through trash accumulated in the gutter as he pulled a syringe out of the mud and began to wipe it off. He was going to use this dirty, bent needle from an unknown source to inject himself. We were able to stop him and convince him to put the syringe into a sharps box instead, but only because we could also point him to the exchange.

I wholeheartedly support needle exchange programs because their positives outweigh their negatives. Right now, they are needed and I'm glad they can be funded. If you can help encourage opening one in your area, you should. It's worth it.

And hopefully a day will come when there is no longer any need for them.

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