

Paul R. LePage, Governor

Mary C. Mayhew, Commissioner

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February 13, 2017

Senator Eric Brakey, Chair
Representative Patricia Hymanson, Chair
Joint Standing Committee on Health
and Human Services
#100 State House Station
Augusta, Maine 04333-0100

Senator Lisa Keim, Chair
Representative Matthew W. Moonen, Chair
Joint Standing Committee on the Judiciary
#100 State House Station
Augusta, Maine 04333-0100

Dear Senator Brakey, Senator Keim, Representative Hymanson, Representative Moonen and Members of the Joint Standing Committees on Health and Human Services and Judiciary:

Enclosed please find the Hypodermic Apparatus Exchange report for 2016. Maine law 22 MRSA c.252-A, § 1341, Hypodermic Apparatus Exchange Programs, requires the Department of Health and Human Services to file an annual report to the Legislature's Judiciary and Health and Human Services Committees on the status of exchange programs certified under this section.

Please feel free to contact Sheryl Peavey at 287-3270 if you have any questions or concerns.

Sincerely,

Mary C. Mayhew
Commissioner

MCM/klv

Enclosure



Maine Center for Disease Control and Prevention

An Office of the
Department of Health and Human Services

Paul R. LePage, Governor

Mary C. Mayhew, Commissioner

Hypodermic Apparatus Exchange Programs Report for 2016

Reporting Period 11/1/2015 – 10/31/2016

Prepared by the DHHS, Maine CDC HIV, STD, and Viral Hepatitis Program

Maine law 22 MRSA c.252-A, § 1341, Hypodermic Apparatus Exchange Programs, requires the Maine Center for Disease Control to file an annual report to the Legislature's Judiciary and Health and Human Services Committees on the status of exchange programs certified under this section.

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Executive Summary

The Maine DHHS Center for Disease Control and Prevention is authorized by 22 MRSA ch. 252-A, §1341(1) (“Hypodermic Apparatus Exchange Programs”) to certify hypodermic apparatus exchange programs as a public health promotion strategy. This report is required as part of statute (22 MRSA ch. 252-A, §1341(3)), and reflects the exchange activities conducted by the certified exchange sites in Maine for the period from November 1, 2015 to October 31, 2016.

The certification of Hypodermic Apparatus Exchange Programs¹ by the Department is allowed only for those programs that meet the requirements established by statute (22 MRSA ch. 252-A, §1341(2)). No State or Federal funds are used to support the exchange activities at the sites during this reporting period. The ban on using federal funds to support exchange activities was lifted on January 6, 2016². The Maine Legislature passed LD 1552 (*An Act To Reduce Morbidity and Mortality Related to Injection Drugs*) in the spring of 2016, but no funds were appropriated to support this action. Additional regulatory rules were also promulgated through this statute (10-144 CMR Ch. 252). These rules are intended to be amended in 2017.

Four state-certified Hypodermic Apparatus Exchange Programs operated six sites in Maine in 2016.

Agency	Site Location	Certification Date
City of Portland	Portland	September 1998
Down East AIDS Network	Ellsworth	July 2014
Down East AIDS Network	Bangor	July 2014
Down East AIDS Network	Machias	July 2014
Health Reach Harm Reduction	Augusta	December 2004
Frannie Peabody Center	Lewiston	March 2015

¹ Hypodermic Apparatus Exchange Programs are also known as Needle Exchange Programs (NEP) or Syringe Exchange Programs (SEP) and may be used interchangeably here within.

² <http://harmreduction.org/wp-content/uploads/2012/01/Syringe-Exchange-June-4-NMAC.pdf>

Needle exchange programs (NEPs) are an evidence-supported structural intervention³ that target injection drug users (IDUs) to reduce the transmission of HIV, Hepatitis C, and bacterial infections (Neaigus et al., 2008; Holtzman et al., 2009; Des Jarlais et al., 2005). These programs not only provide IDUs with harm reduction materials at legal agencies, but NEPs also have shown to reduce injection risk behaviors over time (Huo & Ouellet, 2007; Des Jarlais et al., 2009). Huo & Ouellet (2007) examined long-term needle exchange program usage and showed that NEP facilitated long-term reductions in injection risk practices.

In 2016, 4,849 individuals were enrolled at Hypodermic Apparatus Exchange Programs in order to exchange contaminated hypodermic apparatus for a clean apparatus. This is a modest 1.4 % increase from 2015. Maine State law requires a one-to-one exchange except in the initial enrollment exchange where ten clean hypodermic syringes can be distributed for future exchanges.

The sites collected a total of 774,195 used needles from 4,849 individuals during 20,422 exchange events⁴. This is an average of 4.1 visits per person exchanging an average of approximately 38 needles per visit.

The collection of contaminated needles has increased steadily over the last five years (see Graph 3.5 on page 10). During the reporting period (11/1/15 – 10/31/16), 736,274 clean needles were distributed. This is a 72% increase from 2015. The exchange sites continue to collect more needles than they distribute and are often asked to dispose of used needles found in public places. Collecting more needles than are distributed is an important factor for reducing the possibility of contaminated needles being the cause of infectious disease transmission.

A total of 151 HIV tests were conducted with enrolled individuals at the needle exchange sites. There were 2,928 referrals for HIV testing and 2,614 referrals for Hepatitis C testing offered. Exchange site staff made a total of 11,951 referrals to primary care providers, substance abuse treatment programs, and housing assistance programs. This is a 61% increase from 2015.

Globally, nationally, and locally in Maine, evidence has shown Hypodermic Exchange Programs continue to be a proven intervention for HIV and Hepatitis C prevention as well as a direct link to many health services, especially substance abuse treatment and care programs.

³ A *structural intervention* is generally accepted as an intervention that is replicable and governed by specific standards and process.

⁴ An *exchange event* is considered to happen when an individual accesses an exchange site to exchange one or more used needles for unused ones and/or to receive other support services.

Maine Center for Disease Control, HIV, STD, and Viral Hepatitis Program

Hypodermic Apparatus Exchange Programs Report for 2016 Reporting Period 11/1/2015 – 10/31/2016

Maine law 22 MRSA ch. 252-A, §1341 (2) Hypodermic Apparatus Exchange Programs, requires the Maine Center for Disease Control to file an annual report to the Legislature's Judiciary and Health and Human Services Committees on the status of exchange programs certified under this section. The required information is contained below.

Certified Hypodermic Apparatus Exchange Programs in Maine: There were four certified Hypodermic Apparatus Exchange Programs operating six sites in Maine in 2016.

- The City of Portland, was certified in September 1998, and operates one site in Portland.
- Down East AIDS Network was recertified in July 2014 under the new name Down East AIDS Network + Health Equity Alliance, and assumed the operation of the former Eastern Maine AIDS Network site and added a new site in Machias.
- Health Reach Harm Reduction, located in Augusta, was certified in December 2004.
- Frannie Peabody Center, located at the Recovery Together facility in Auburn. This site was recertified in 2016 due to a change in operation location.

For agency-specific information and data please see Attachments A, B, C, D, E, and F.

Map 1.1 - Location of Hypodermic Apparatus Exchange sites in Maine.



2016 Data

From 2009 to 2016, Maine Needle Exchange Programs have shown increased usage. The total number of enrolled, total needles exchanged and total number of referrals to other services have consistently increased over the last eight years. There has also been a significant increase (See Graph 3.5) in the total number of syringes collected and syringes disposed through the Needle Exchange Program from 2009 to 2016.

Aggregate Data for Maine Hypodermic Apparatus Exchange Programs 2016

Indicator	Quantity
Total enrolled	4,849
New enrollees, total	905
Number of HIV Tests conducted with new ⁵ enrollees	37
Total number of HIV Tests conducted with exchange consumers	151
Number of syringes collected, total	774,195
Number of syringes disposed, total	774,195
Syringes distributed, total	736,274
Number of initial exchange kits distributed*	732
Total exchanges	20,422
Number of off-site exchanges ⁶	860
Total referrals made (see Graph 1.1)	11,951

*Initial exchange kits contain 10 syringes per kit.

⁵ Newly enrolled within in the reporting period: November 1, 2015 – October 31, 2016

⁶ Exchanges made outside of certified physical site may include mobile units or locations set by appointment with staff.

Graph 1.1 Referrals made for enrollees by type, 2016

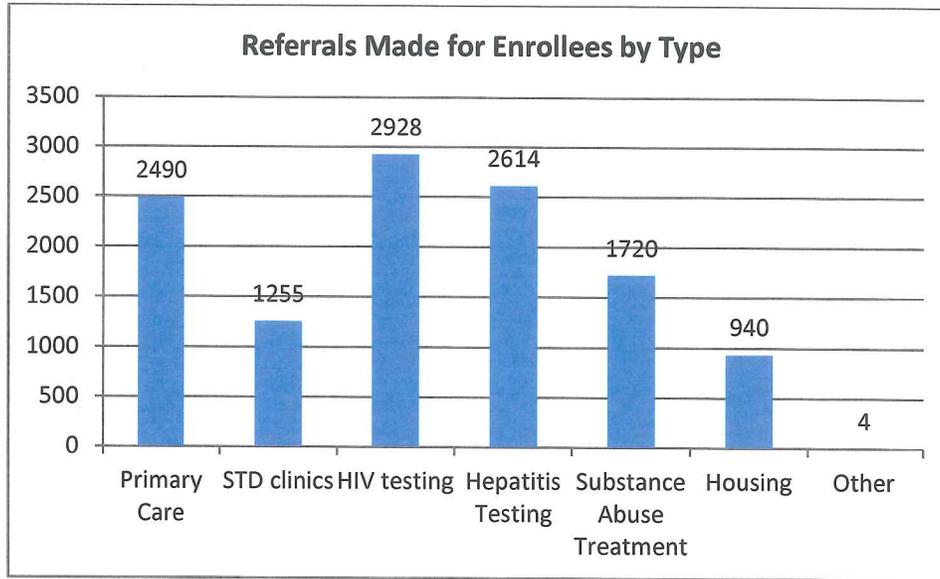


Table 1.1 - 2016 Enrollee Demographics

	Male 18-29	Male 30+	Female 18-29	Female 30+	Transgender M-F 18-29	Transgender M-F 30+	Transgender F-M 18-29	Transgender F-M 30+
Hisp ⁷ /Latino	16	14	8	8	0	0	0	0
Non-Hisp/Lat ⁸	1340	1641	860	962	0	0	0	0
TOTALS	1356	1655	868	970	0	0	0	0
AI/AN ⁹	25	26	15	25	0	0	0	0
Asian	4	5	1	3	0	0	0	0
Blk/Af. Am ¹⁰	25	14	7	8	0	0	0	0
H/P.I. ¹¹	0	0	0	0	0	0	0	0
White	1286	1600	834	929	0	0	0	0
Other races	16	10	11	5	0	0	0	0
TOTALS	1356	1655	868	970	0	0	0	0

⁷ Hispanic

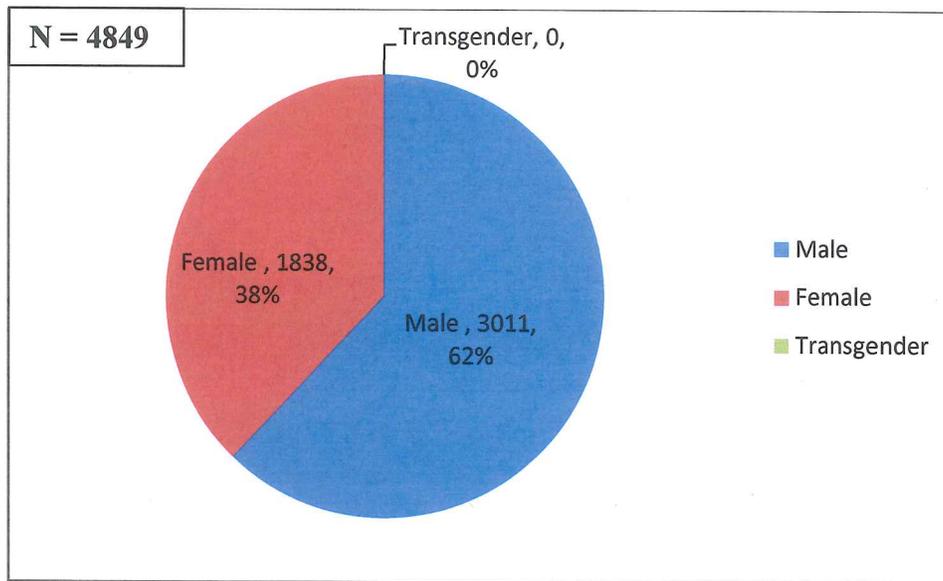
⁸ Non Hispanic / Latino

⁹ American Indian / American Native

¹⁰ Black / African American

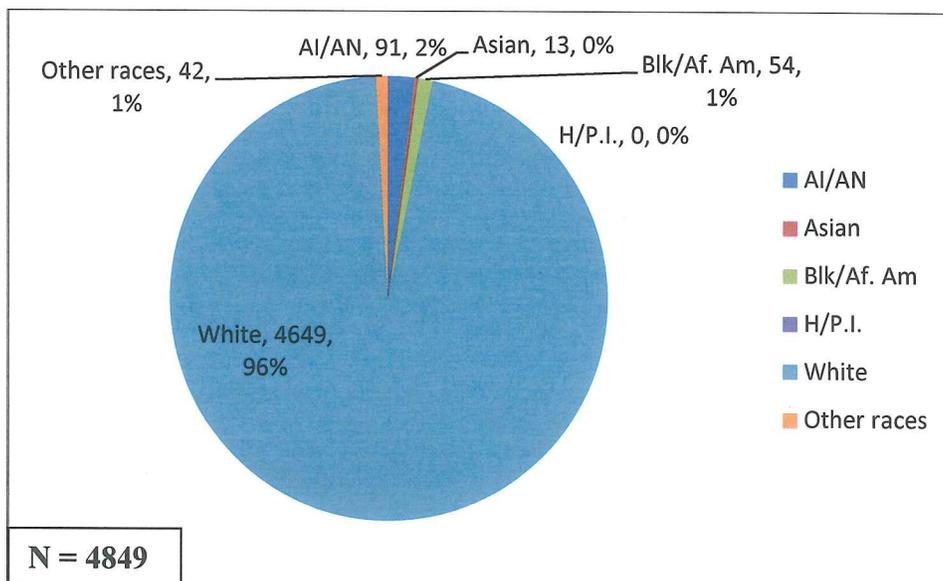
¹¹ Hawaiian / Pacific Islander

Graph 2.1 - Gender Distribution of 2016 Needle Exchange Programs Enrollees



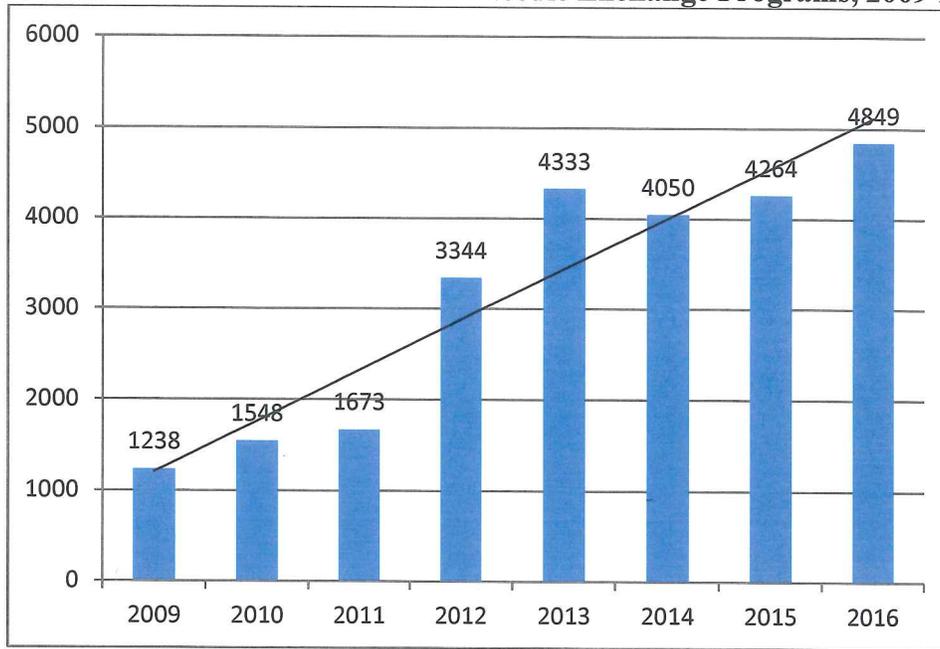
From November 1, 2015 to October 31, 2016 enrollees of needle exchange programs were 62% males and 38% females.

Graph 2.2 - Race Distribution of 2016 Needle Exchange Program Enrollees



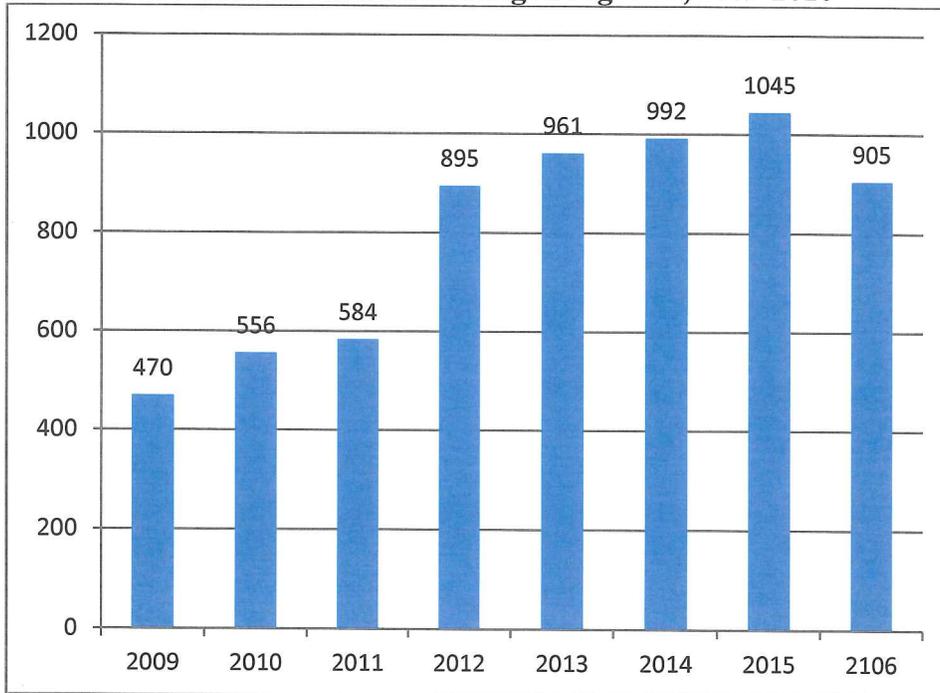
From November 1, 2015 to October 31, 2016, the race distribution for enrollees of needle exchange programs were 96% White, 2% American Indian/Alaskan Native, 1% Black/African American, and 1% Other. Less than 1% of individuals identified as Asian or Hawaiian or Pacific Islander.

Graph 3.1 - Total Number of Enrollees in Needle Exchange Programs, 2009-2016



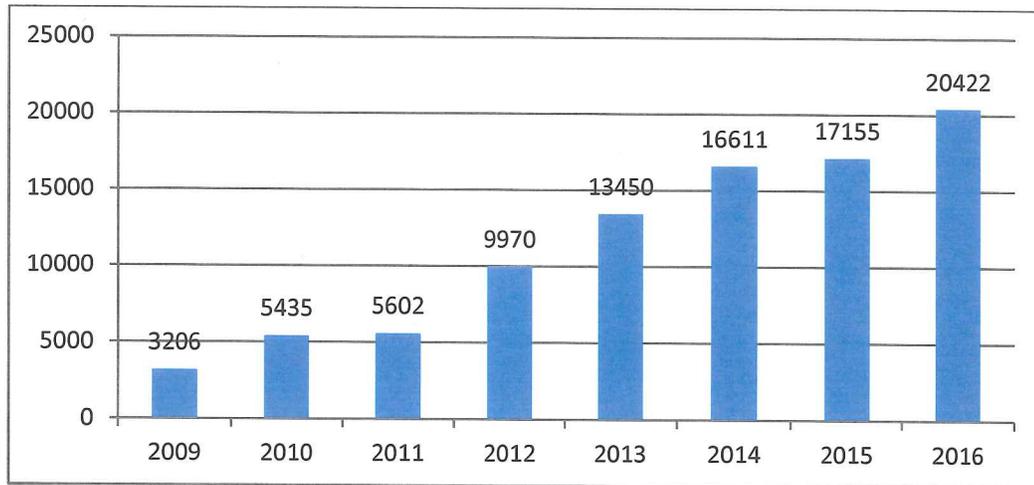
Graph 3.1 highlights the total number of enrollees in needle exchange programs over the past 8 years. Trends indicate a steady increase of participants in NEPs. Since 2005, a total of 26,484 people have ever enrolled in an exchange program here in Maine.

Graph 3.2 - New Enrollees in Needle Exchange Programs, 2009-2016



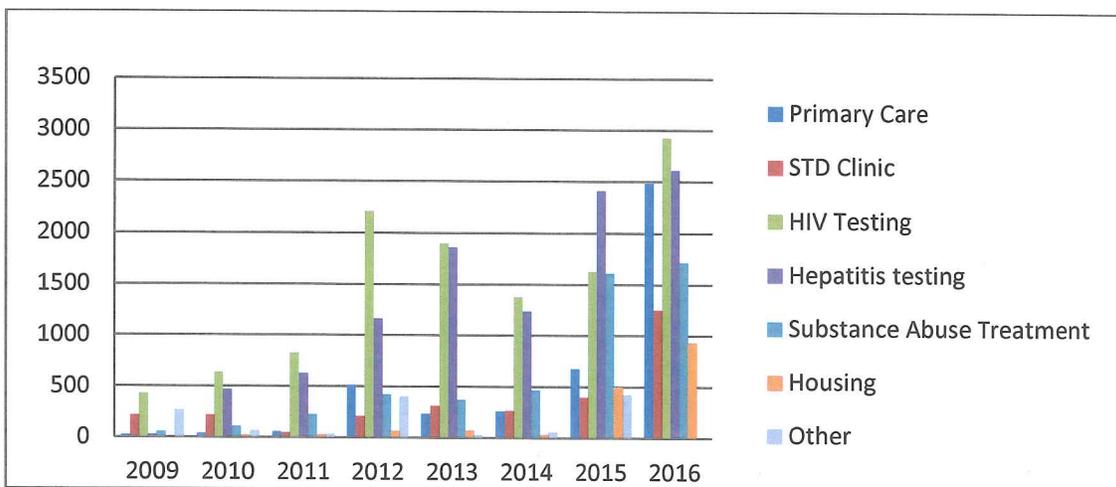
Graph 3.2 shows the total *new* enrollees in a needle exchange program in the past 8 years. While this is a slight decrease in new enrollees for 2016, it is too early to know if this will affect the overall enrollment trend.

Graph 3.3 - Total Number of Exchanges at Needle Exchange Programs in 2009-2016



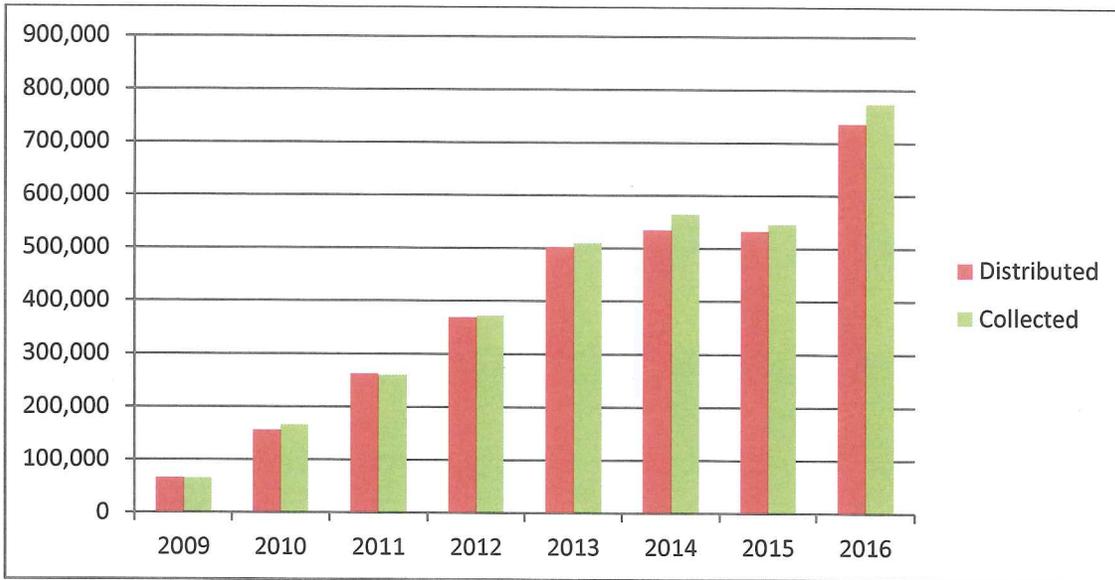
Graph 3.3 shows the number of exchanges (face to face interactions, not number of needles) completed at needle exchange programs over the past 8 years. Needle exchange events have continued to increase over time.

Graph 3.4 - Total Number of Referrals for Other Services at Needle Exchange Programs from 2009-2016



Graph 3.4 shows the importance of the needle exchange programs in connecting needle users to other services that may increase improved health outcomes for this population. These other services include referrals to primary care, STD clinics, HIV testing, viral hepatitis testing, substance abuse and treatment, and housing services. In 2016, exchange site staff made a total of 11,951 referrals to primary care providers, substance abuse treatment programs, and housing assistance programs.

Graph 3.5 - Total Number of Syringes Distributed and Collected at Needle Exchange, 2009-2016



Graph 3.5 highlights the increase of the number of syringes that have been collected over 8 years.

Attachment A

**City of Portland, Public Health Division Maine
Annual Report 2016**

Operator: City of Portland, Maine Public Health Division

Location of Sites: 103 India St. Portland, ME; Preble Street Day Shelter;
Preble Street Teen

Indicator	Quantity
Total enrolled	2,717
New enrollees, total	265
Number of HIV Tests conducted with new enrollees	25
Total number of HIV Tests conducted with exchange consumers	108
Number of syringes collected, total	158,537
Number of syringes disposed, total	158,537
Syringes distributed, total	152,512
Number of initial exchange kits distributed*	260
Total exchanges	6,877
Number of off-site exchanges	860
Total referrals made	7,826

*Initial exchange kits contain 10 syringes per kit.

List number of referrals made to:

Primary Care -2,396
STD clinic - 1,207
HIV testing - 1,103
Hepatitis Testing - 812
Substance Abuse Treatment - 1,443
Housing - 865
Other- 0

Enrollee Demographics, City of Portland, 2016:

Clients served w/ CDC Funds	Male 18-29	Male 30+	Female 18-29	Female 30+	Transgender M-F 18-29	Transgender M-F 30+	Transgender F-M 18-29	Transgender F-M 30+
Hisp/Latino	2	4	0	3	0	0	0	0
Non-Hisp/Lat	821	876	501	510	0	0	0	0
TOTALS	823	880	501	513	0	0	0	0
AI/AN	0	1	0	0	0	0	0	0
Asian	2	3	0	2	0	0	0	0
Blk/Af. Am	12	8	6	5	0	0	0	0
H/P.I.	0	0	0	0	0	0	0	0
White	805	868	493	506	0	0	0	0
Other races	4	0	2	0	0	0	0	0
TOTALS	823	880	501	513	0	0	0	0

Attachment B

Down East AIDS Network + Health Equity Alliance Annual Report 2016

Operator: Down East AIDS Network + Health Equity Alliance (Established 2005 and recertified in 2014)

Location of Site: Ellsworth Office
25A Pine Street
Ellsworth, ME 04065

Indicator	Quantity
Total enrolled	399
New enrollees, total	117
Number of HIV Tests conducted with new enrollees	0
Total number of HIV Tests conducted with exchange consumers	0
Number of syringes collected, total	197,523
Number of syringes disposed, total	197,523
Syringes distributed, total	108,984
Number of initial exchange kits distributed*	117
Total exchanges	3,740
Number of off-site exchanges	0
Total referrals made	302

*Initial exchange kits contain 10 syringes per kit.

List number of referrals made to:

Primary Care - 33
STD clinic - 21
HIV testing - 112
Hepatitis Testing - 112
Substance Abuse Treatment - 24
Housing - 0
Other - 0

Enrollee Demographics, Down East AIDS Network + HEAL – Ellsworth, 2016:

Clients served w/ CDC Funds	Male 18-29	Male 30+	Female 18-29	Female 30+	Transgen. M-F 18-29	Transgen. M-F 30+	Transgen. F-M 18-29	Transgen. F-M 30+
Hisp/Latino	2	1	1	0	0	0	0	0
Non-Hisp/Lat	107	136	67	85	0	0	0	0
TOTALS	109	137	68	85	0	0	0	0
AI/AN	2	1	1	1	0	0	0	0
Asian	1	1	0	0	0	0	0	0
Blk/Af. Am	2	0	1	1	0	0	0	0
H/P.I.	0	0	0	0	0	0	0	0
White	103	134	65	83	0	0	0	0
Other races	1	1	1	0	0	0	0	0
TOTALS	109	137	68	85	0	0	0	0

Attachment C

**Down East AIDS Network + Health Equity Alliance
Annual Report 2016**

Operator: Down East AIDS Network + Health Equity Alliance (Established 2005 and recertified in 2014)

Location of Site: Bangor Office
51 Broadway /109 Pine
Bangor ME 04401

Indicator	Quantity
Total enrolled	904
New enrollees, total	390
Number of HIV Tests conducted with new enrollees	8
Total number of HIV Tests conducted with exchange consumers	15
Number of syringes collected, total	233,460
Number of syringes disposed, total	233,460
Syringes distributed, total	233,586
Number of initial exchange kits distributed*	261
Total exchanges	7,815
Number of off-site exchanges	0
Total referrals made	3,647

*Initial exchange kits contain 10 syringes per kit.

List number of referrals made to:

- Primary Care - 52
- STD clinic - 0
- HIV testing -1688
- Hepatitis Testing – 1663
- Substance Abuse Treatment - 182
- Housing - 62
- Other- 0

Enrollee Demographics, Down East AIDS Network + HEAL Bangor Site, 2016:

Clients served w/ CDC Funds	Male 18-29	Male 30+	Female 18-29	Female 30+	Transgen. M-F 18-29	Transgen. M-F 30+	Transgen. F-M 18-29	Transgen. F-M 30+
Hisp/Latino	5	2	3	0	0	0	0	0
Non-Hisp/Lat	253	290	181	170	0	0	0	0
TOTALS	258	292	184	170	0	0	0	0
AI/AN	18	7	12	10	0	0	0	0
Asian	1	0	0	0	0	0	0	0
Blk/Af. Am	10	4	0	2	0	0	0	0
H/P.I.	0	0	0	0	0	0	0	0
White	219	274	164	155	0	0	0	0
Other races	10	7	8	3	0	0	0	0
TOTALS	258	292	184	170	0	0	0	0

Attachment D

**Down East AIDS Network + Health Equity Alliance
Annual Report 2016**

Operator: Down East AIDS Network + Health Equity Alliance (Established 2005 and recertified in 2014)

Location of Site: Machias Office
7 VIP Drive
Machias, ME 04654

Indicator	Quantity
Total enrolled	40
New enrollees, total	27
Number of HIV Tests conducted with new enrollees	2
Total number of HIV Tests conducted with exchange consumers	4
Number of syringes collected, total	4,155
Number of syringes disposed, total	4,155
Syringes distributed, total	4,179
Number of initial exchange kits distributed*	27
Total exchanges	167
Number of off-site exchanges	0
Total referrals made	41

*Initial exchange kits contain 10 syringes per kit.

List number of referrals made to:

- Primary Care - 2
- STD clinic - 0
- HIV testing - 12
- Hepatitis Testing - 12
- Substance Abuse Treatment - 13
- Housing - 2
- Other- 0

Enrollee Demographics, Down East AIDS Network + HEAL Machias Site, 2016:

Clients served w/ CDC Funds	Male 18-29	Male 30+	Female 18-29	Female 30+	Transgen. M-F 18-29	Transgen. M-F 30+	Transgen. F-M 18-29	Transgen. F-M 30+
Hisp/Latino	0	0	0	0	0	0	0	0
Non-Hisp/Lat	4	20	4	12	0	0	0	0
TOTALS	4	20	4	12	0	0	0	0
AI/AN	0	0	0	0	0	0	0	0
Asian	0	0	0	0	0	0	0	0
Blk/Af. Am	0	0	0	0	0	0	0	0
H/P.I.	0	0	0	0	0	0	0	0
White	4	20	4	12	0	0	0	0
Other races	0	0	0	0	0	0	0	0
TOTALS	4	20	4	12	0	0	0	0

Attachment E

**Health Reach Harm Reduction
Annual Report 2016**

Operator: Health Reach Harm Reduction (Established 2004)

Location of Site: 9 Green Street
Augusta, ME 04330

Indicator	Quantity
Total enrolled	674
New enrollees, total	58
Number of HIV Tests conducted with new enrollees	2
Total number of HIV Tests conducted with exchange consumers	18
Number of syringes collected, total	123,335
Number of syringes disposed, total	123,335
Syringes distributed, total	113,113
Number of initial exchange kits distributed*	37
Total exchanges	784
Number of off-site exchanges	0
Total referrals made	35

*Initial exchange kits contain 10 syringes per kit.

List Number of referrals made to:

- Primary Care- 2
- STD clinic - 2
- HIV testing - 7
- Hepatitis Testing - 9
- Substance Abuse Treatment - 8
- Housing - 3
- Other - 4

Enrollee Demographics, Health Reach Harm Reduction, 2016:

Clients served w/ CDC Funds	Male 18-29	Male 30+	Female 18-29	Female 30+	Transgen. M-F 18-29	Transgen. M-F 30+	Transgen. F-M 18-29	Transgen. F-M 30+
Hisp/Latino	5	7	2	5	0	0	0	0
Non-Hisp/Lat	112	286	84	173	0	0	0	0
TOTALS	117	293	86	178	0	0	0	0
AI/AN	4	17	2	14	0	0	0	0
Asian	0	1	1	1	0	0	0	0
Blk/Af. Am	1	2	0	0	0	0	0	0
H/P.I.	0	0	0	0	0	0	0	0
White	111	272	83	162	0	0	0	0
Other races	1	1	0	1	0	0	0	0
TOTALS	117	293	86	178	0	0	0	0

Attachment F

**Frannie Peabody Center
Annual Report 2016**

Operator: Frannie Peabody Center
30 Danforth Street, Suite 311
Portland, Maine 04101

Location of Site: Recover Together
97 Main St, 3rd Floor
Auburn, ME 04210

Indicator	Quantity
Total enrolled	115
New enrollees, total	48
Number of HIV Tests conducted with new enrollees	0
Total number of HIV Tests conducted with exchange consumers	6
Number of syringes collected, total	57,185
Number of syringes disposed, total	57,185
Syringes distributed, total	51,900
Number of initial exchange kits distributed*	22
Total exchanges	1,039
Number of off-site exchanges	0
Total referrals made	100

*Initial exchange kits contain 10 syringes per kit.

List Number of referrals made to:

Primary Care- 5
STD clinic - 25
HIV testing - 6
Hepatitis Testing - 6
Substance Abuse Treatment - 50
Housing - 8
Other - 0

Enrollee Demographics, Frannie Peabody Center, 2016

Clients served w/ CDC Funds	Male 18-29	Male 30+	Female 18-29	Female 30+	Transgen. M-F 18-29	Transgen. M-F 30+	Transgen. F-M 18-29	Transgen. F-M 30+
Hisp/Latino	2	0	2	0	0	0	0	0
Non-Hisp/Lat	43	33	23	12	0	0	0	0
TOTALS	45	33	25	12	0	0	0	0
AI/AN	1	0	0	0	0	0	0	0
Asian	0	0	0	0	0	0	0	0
Blk/Af. Am	0	0	0	0	0	0	0	0
H/P.I.	0	0	0	0	0	0	0	0
White	44	32	25	11	0	0	0	0
Other races	0	1	0	1	0	0	0	0
TOTALS	45	33	25	12	0	0	0	0

Sources:

Bluthenthal, R.N., Anderson, R., Flynn, N.M., & Kral, A.H. (2007). Higher syringe coverage is associated with lower odds of HIV risk and does not increase unsafe syringe disposal among syringe exchange program clients. *Drug and Alcohol Dependence*, 89, 214-222.

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Neaigus, A., Zhao, M., Gyarmathy, A., Cisek, L., Friedman, S.R., & Baxter, R.C. (2008). Greater drug injecting risk for HIV, HBV, and HCV infection in a city where syringe exchange and pharmacy syringe distribution are illegal. *Journal of Urban Health*, 85, 309-322.