PURPOSE
Prevention of the spread of sexually transmitted and blood-borne infections (STBBI) through distribution of harm reduction supplies

SCOPE & GOAL
Harm reduction supplies and condoms will be available to Street Connections target populations through distribution by staff working in the making Healthy Sexuality and Harm Reduction team

PROCEDURE
1.0 Access to supplies should extend to whoever needs them regardless of the person’s age, drug using status, or drug of choice.
   1.1 All clients will be requested to identify current drug use practices.
   1.2 Only clients currently using drugs by a particular route (e.g., inhalation, injection) will be provided with supplies for that route of drug use.
   1.3 All drug-related supplies will be kept out of sight in the van as much as possible to maintain safety

2.0 The following supplies will be offered:
   2.1 **Syringes** are distributed as the client requires to meet needs.
       2.1.1 If the client does not have needles to exchange “loaners” are appropriate. Determine how many needles the client needs and provide him/her enough for a 7 day period if requested.
       2.1.2 It is possible that an individual seeking injection supplies from the program is not seeking supplies for him/herself. In these situations it is appropriate to provide supplies for the purpose of secondary distribution. Encourage no resale of supplies provided by us.
       2.1.3 One for one needle exchange is encouraged. Due to risk of needle stick injury, number of needles returned is estimated, never counted by hand.
       2.1.4 The program should strive for a 100% used needle return. Encourage returns and/or proper disposal of used needles.
       2.1.5 Nurses and Outreach Workers may offer to inspect injection sites for evidence of infection and with a view to reinforcing safer injection practices.
       2.1.6 Provide education about:
Correct single person use (e.g., checking for burr, bevel up, confirming located in vein by drawing small amount of blood, pressure on puncture site after use).
- The risks associated with sharing syringes and drug mixing equipment.
- The risk of reusing your own non-sterile syringes and drug mixing equipment.
- Disposal of used syringes.

2.2 **Spoons** are always offered to those who inject drugs. Provide education:
- Only a single person should use one spoon.
- The spoon with the drug and water intended for injection should be heated to a boil to kill most germs.
- Washing or heating may not kill all viruses and bacteria. Hepatitis C is easily spread by sharing ‘works’ such as spoons, filters, water, etc.
- It may be helpful to mark personal spoons in some way to reduce risk that someone else might use it.
- Spoons should be stored in a safe place that only you have access to.
- If you are unsure if others have used your spoon, discard it and use a new one.
- Always wipe spoon with an alcohol swab before use, even the first time you use the spoon, as spoons are not sterile.
- If you might reuse the spoon, clean it after use to remove residue. Residue is a good place for bacteria to grow.

2.3 **Sterile water** is always offered for every syringe distributed to those who inject drugs. Users should be instructed that:
- The vial should never be shared with anyone as this poses a risk for cross contamination.
- Squeeze the vial before use to make sure no water escapes. If water does leak or squeeze out of the vial, do not use it. It may no longer be sterile.
- Twist the cap and pull it completely off the vial. Turn the vial upside down and squeeze what you need into your spoon or cooker.
- Do not puncture the plastic water container with a needle to withdraw water into a syringe.
- Throw out any remaining water and the plastic container.
 Store the vials of water at room temperature. Keep them away from extreme heat and cold.
 Use a new syringe each time you inject.
 Do not re-use or share a used syringe or water. The water is for one use only. Ask for as many as you need.

2.4 **Filters** (cotton balls) should be offered. Always wash hands with alcohol hand wash before packaging cotton balls. Educate clients regarding:
 Their correct use.
 Discourage reuse of filters as this practice increases risk for infection by bacteria that may grow in the wet filter.
 Cotton balls may prevent large particles from getting into the syringe, but they will not prevent the entry of small organisms like bacteria, viruses and other small particles.
 Disposal of used filters.

2.5 **Alcohol swabs** are offered in the quantities requested by clients, usually based on the number of needles requested. Provide education about:
 Proper skin cleaning techniques including the need for alcohol to dry on its own prior to injection
 Discourage use of alcohol swabs after injection
 Single person use of swabs and the risks of HIV and HCV if sharing swabs
 Disposal of used swabs

2.6 **Sharps containers** are offered to reduce risk of needle injuries. See handling sharps practice guideline. Clients are asked to fill containers to appropriate levels.

2.7 Users are offered **tourniquets** to reduce harm. Educate users about:
 Correct use of single person tourniquets.
 Risk to tissue and veins if a quick release tourniquet is not used.
 Risk of bacterial and viral contamination due to shared tourniquets.

2.8 Users are offered **Vitamin C – Ascorbic Acid powder sachets** to reduce damage to muscle and vein tissue. Ascorbic acid has been identified as the least harmful of acidifiers used to dissolve drugs for injecting. Clients should be offered
this item for safer dissolving of heroin and crack for injection use. Provide education about and encourage client to use the ascorbic acid as follows:

- One sachet per needle for the above drugs should be offered.
- Place the drug into the spoon or cooker.
- Add water.
- Rip open sachet. Tap a small amount of the ascorbic acid into the spoon/cooker (about ¼ the amount of the drug).
- Heat the mixture if necessary.
- Stir and mix as necessary to dissolve the drug.
- If the drug is not dissolved, add a little more ascorbic acid (avoid adding too much ascorbic acid as this will damage the veins). Some of the “filler” may not dissolve. This is ok.
- If the mixture is hot, wait 5-10 minutes before injecting. Injecting hot liquid may cause blood clotting and vein damage.
- Filter the drug through clean cotton before injecting. This will remove fillers that did not dissolve.
- The ascorbic acid powder should not be handled due to possible contamination.
- Clients should be encouraged to use as little of the sachet as possible and discard the remainder of the open sachet. Using too much acidifier can increase vein and tissue damage.
- There is no known advantage in using acidifiers with pills.

2.9 Safer Crack Use Kits (SCUKs)

2.9.1 SCUKs or any components of safer crack use kits are provided to a user upon request. SCUKs or any components of safer crack use kits are provided to a user upon request. Up to 5 SCUKs/day provided, and secondary distribution is acceptable to active users.

2.9.2 People must attend for a SCUK in person. The program does not do home visits for SCUKs. The only exception to this is for someone with a legitimate mobility disability that makes it impossible for them to get to the street. In this situation someone else can pick a SCUK up for this person or a home visit can be made.

2.9.3 Crack house operators are allowed up to five SCUKs per day.

2.9.4 Discourage reselling of SCUKs.

2.9.5 If cracked or burned skin on the lips or fingers are observed, it is an opportunity to discuss safer use.
2.9.6 When a client reports that the stem was broken within a week it may indicate unsafe use and reports of breakage within a week is an opportunity to review safer use.

2.9.7 Educate clients regarding:
- Risk of HIV and HCV if sharing glass stems and other devices for inhaling or smoking drugs.
- Correct single-person use of stems. This includes the assembly of the kit with the brass screens folded like an umbrella before inserting into the stem, round side down. This allows for the screens to bind together when compacted so that they do not come loose and damage the user's airway.
- Health consequences of using products other than brass screens (e.g., Brillo™ brand steel wool). Harms associated with steel wool use include: toxic volatile organic carbons released when steel wool is burned. This coating is burned off after the first use and not likely to be a persisting problem. Use of steel wool is also associated with loose shards breaking off and potentially damaging the inner mouth or airway. Use of brass screens reduces these harms. If a client is unwilling to use brass screens rather than steel wool, they can be encouraged to use screens between the steel wool and the user as a barrier for loose shards and to burn their steel wool before use.
- Correct disposal of used glass stems and mouth pieces.

2.9.8 Safer crack use kits are never provided at home visits. If someone other than the person being visited requests a SCUK while the van is stopped for a home visit, an offer may be made to distribute the SCUK at the end of the street or some other nearby location. Clients may not realize that this is not a regular stop. This practice supports privacy while meeting client needs.

2.9.9 During the daytime, SCUKS can be accessed from Monday through Friday at the office site. Van stops can be arranged for distribution of SCUKs to supply groups of people requesting SCUKs. (e.g., We may offer to stop at a particular street corner at 2 PM.)

2.10 Condoms, Lube and Gloves
2.10.1 We take the opportunity to distribute condoms with all clients. There is a limit of 24 condoms per distribution.
2.10.2 Generally lubricated condoms are provided. Unlubricated condoms are distributed upon request or when education regarding their use is also provided.

2.10.3 Water-soluble lubricant is provided upon request and offered to all.

2.10.4 Nitrile gloves are provided upon request for those who engage in manual or digital-vaginal or digital-anal sex with others, or when the person's hand has cuts, sores or rashes.

2.10.5 Educate clients regarding:

2.10.6 Risk of HIV, HCV and other STIs through oral, vaginal and anal penetration as well as cunnilingus and anilingus.

2.10.7 Encourage the practice of safer sex with every sexual encounter.

2.10.8 Discourage use of oil-based products as lubricants when using latex condoms as it will weaken the condom and cause it to break. Those wearing lipstick or using lip balm may be reminded that oil-based products weaken latex.

2.10.9 Condom demonstration should be offered to new clients and as required.

2.10.10 Encourage safer sex with every sexual encounter including regular or main partners.

VALIDATION

RECOMMENDED READING