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Is Oregon Protected from Indiana's HIV Epidemic?

Eugene, OR—April 6, 2015: On March 26th, sources reported that Indiana's Scott County, population 24, 181, had hit an epidemic surge in HIV diagnoses: 80 new cases since December, or almost one case per day. Indiana Governor Mike Pence has said that 100 percent of these new cases could be traced to injection drug use. When comparing this information to Lane County's three new HIV infections in all of 2014, and the fact that Lane's population is almost 15 times that of Scott County, the question remains: why is the incidence of HIV skyrocketing in small, rural Scott County, Indiana and not in Lane County, Oregon—an area with high rates of injection drug use that sits directly on a major drug trafficking interstate?

During Thursday's press conference Governor Pence declared a Public Health Emergency and introduced a 30-day syringe exchange program to prevent anymore infections. "The decision to introduce a syringe exchange program in Scott County will help prevent new infections" HIV Alliance Acting Executive Director Renee Yandel acknowledged. "However, a syringe exchange program is about improving community health by preventing new infections of diseases and 30 days is not a long enough time to make this public health program effective." News sources show that Ms. Yandel is not alone in her concern over the 30-day limit, but despite the wide spread criticism Governor Pence has shown no sign of amending the temporary nature of the program, saying "I do not support needle exchange as anti-drug policy, but this is a public health emergency."

"Misinformation and misconceptions are commonplace when it comes to syringe exchange programs," stated Scott Davis, the Syringe Exchange Coordinator, "but the numbers tell the true story." HIV Alliance began offering a syringe exchange program in Lane County in 1999 and in Douglas and Josephine Counties in 2012. According to Ms. Yandel, "Because Oregon adopted syringe exchange programs early on in the HIV epidemic, we now have very few new infections of HIV in people who use injection drugs – probably less than 10 a year and this is in a county that is bisected by a major drug trafficking route and where injection drug use is extremely prevalent." Not only have syringe exchange programs maintained a low HIV incident rate in Oregon, but "syringe exchange programs are also extremely cost-effective prevention programs," according to HIV Alliance Finance Director Jen Salvatore. "A new syringe costs

\$.09 but the lifetime costs for HIV can be as much as \$600,000.”

Over the years HIV Alliance has had many partners that provided support in the implementation of this program, including PeaceHealth, Pacific Source, Trillium, Mercy Hospital, and United Way. These organizations and many other supporters and volunteers recognize how critical these programs are as prevention tools not only for diseases like HIV and Hepatitis C, but for other serious infections related to the use of injection drugs. Indeed, with the state reducing funds for prevention more and more every year, syringe exchange programs like those put on by HIV Alliance are almost entirely dependent on private donations.

In addition to its syringe exchanges, HIV Alliance provides care coordination, nursing, case management and pharmaceutical support to people living with HIV/AIDS in 11 counties. Annually the organization provides between 400,000 and 450,000 new syringes to people who inject drugs, and the organization collects many more used syringes for disposal. They also provide HIV and Hepatitis C testing and other health and education services to this highly marginalized population, as well as others who are at risk of becoming infected with HIV and Hepatitis C.

HIV Alliance provides care coordination and advocacy services for people living with HIV/AIDS in 11 Oregon counties. HIV Alliance is an international model for effective and efficient HIV prevention, advocacy, care and education. The mission of HIV Alliance is to support individuals living with HIV/AIDS and preventing new infections.

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