

What does the evidence say about...

1:1 Needle Exchange

Background

A key goal of Needle Syringe Programs (NSP) is to reduce the transmission of HIV, Hepatitis C, and other blood-borne infectious diseases by providing new sterile needles to people who inject substances. One delivery model involves a one-for-one needle exchange rule. This only allows a person to receive a new sterile needle for every one they return to the NSP.

Evidence-Based Best Practice

The one-for-one rule is considered outdated and not recommended in Canada. NSPs aim for 100% coverage of injection drug use, which means that they aim to ensure that every injection occurs with a new sterile needle. One-for-one needle exchange is a barrier to achieving 100% coverage and is not responsive to the realities of substance use, program access, or sterile needle distribution networks.

According to who?

There is wide consensus on this topic in Canada. Established and evidence-based best practice recommendations are against one-for-one needle exchange, as explained in:

1. *Best Practice Recommendations for Canadian Harm Reduction Programs: Parts One and Two*
2. *Ontario Needle Exchange Programs: Best Practice Recommendations*

Further reading

For more details on this topic, please visit ohrn.org/resources/one-for-one

Bottom Line:

In Canada, one-for-one needle exchange is not recommended.