# Crack Pipe Distribution

San Francisco

# Objectives

- To present information about crack smoking & HIV risk in San Francisco
- For the HPPC to vote on the following recommendations for SFDPH
  - identify all options for distributing crack stems as a component of HIV prevention in San Francisco, SFHIV: https://www.sfhiv.org/
  - work with the HPPC to select the best of these options and
  - move forward with distribution.

# Pipe Distribution

- Make crack smoking safer
- Connect with high risk individuals we are not otherwise reaching
  - HIV & other healthcare services
- Extend the ancillary benefits of harm reduction participation to crack smokers
- Engage people with harm reduction earlier in drug use careers
  - Deter smokers from progressing to injection
- Engage more women with harm reduction

# Pipe Distribution

- Connect with high risk individuals we are not otherwise reaching
  - Stop alienating and further stigmatizing crack smokers
  - Address a need outlined in the HPPC's own planning document,
  - 2010 San Francisco HIV Prevention Plan

# Pipe Distribution

- What does crack have to do with HIV?
- Why does crack smoking need to be made safer?
- Why do we need to better engage crack smokers?

Why Crack Smokers

- Crack users & HIV risk
  - Crack use as HIV driver
  - Crack use & high risk sex
  - Crack use facilitates HIV infection
  - Crack use accelerates HIV disease progression

#### Crack & San Francisco

- Crack use is an HIV driver
  - A driver
    - "at least 10% prevalence among one of the high-risk BRPs"
    - "an independent factor for HIV, making a person in a high-risk BRP
    - **2x as likely to contract HIV** compared to someone who is not affected by the driver."

#### Crack in San Francisco

- Large numbers of San Francisco crack smokers
  - Including many
    - Homeless
    - Destitute &
    - Otherwise vulnerable
  - → Populations least likely to be in care for HIV

- Crack & high risk sex
  - Unprotected
  - For money/goods
  - High frequency
  - With STIs
  - Among IDUs and nonIDUs
    - San Francisco IDUs & sex risk

- Crack use facilitates HIV infection
  - Cocaine exposure facilitates in vitro HIV infection
    - Increased percentage of T-cells susceptible to infection
      - Quiescent → G1b cell cycle
      - CCR5 expression

- Crack use accelerates HIV disease progression
  - Acceleration independent of whether on medication
    - CD4 ♥ & viral load ↑
  - Worsens medication adherence
  - More likely to progress from HIV to AIDS
  - More likely to develop and die from AIDS related illness

### Crack & Health Risks

Why Safer Smoking

# Crack Smoking & Health

- Oral Sores & ulcers
- Burns
- Respiratory Injuries & Infections
  - Tuberculosis
  - Pneumonia
- HIV & accelerated disease progression
- HCV, HCB
- STIs

(Baum, et al. 2009; Booth, et al. 2000; Centers for Disease Control and Prevention 1991; Cook, et al. 2008; DeBeck, et al. 2009; Edlin, et al. 1994; Faruque, et al. 1996; Feldman, et al. 2000; Fischer, et al. 2008; Gordon and Lowy 2005; Haim, et al. 1995; Jones, et al. 1998; Kim, et al. 2013; Macías, et al. 2008; Meleca, et al. 1997; Rosenberg, et al. 2001; Story, et al. 2008; Timpson, et al. 2010; Tortu, et al. 2004; Wilson, et al. 1998)

# Health Disparities & Stigma

#### Synergistic Factors:

- Addiction
- Illegality
- Poverty
- Stigma
- Violence
- Public Health & Criminal Justice Systems
- Pervasive demonization
  - Sexism
  - Racism
  - Classism

# Health Disparities & Stigma

- Pervasive demonization
  - Sexism
    - Larger proportion women smoke crack than inject
    - Crack mothers, crack whores, crack babies
  - Racism
    - White and black Americans use crack at roughly the same rates
      - Arrest rates
      - Incarceration rates & sentencing disparities
      - HIV rates
  - Classism
    - Associations with poverty
- Disparate burdens

Crack smokers & IDUs

- Syringe Access Programs for IDUs
  - Short-term incentive
  - Significant, long-term benefits
    - direct & ancillary
    - to the individual & to the general population

- Syringe Access Programs
  - Direct Benefits
  - Significantly reduce risk & incidence
    - HIV
    - HCV, HBV
    - Soft Tissue Injury & Infection
    - Septicemia, Tetanus...

- Syringe Access Programs
  - Ancillary benefits
  - Syringe access participants significantly more likely to
    - Reduce injection frequency or stop injecting
    - Enter treatment
    - Remain in treatment
    - Access additional health and social services

- Syringe Access Programs for IDUs
  - Accessible
  - Short-term incentive
  - Significant, long-term benefits
    - direct & ancillary
    - to the individual & to the general population
- And for Crack smokers?

### Crack Kits



# Crack Pipe Distribution

- Existing Programs
  - Injection frequency
  - Pipe sharing
  - Use of improvised pipes
  - Crack smoking

# Crack Pipe Distribution

- Success of existing programs
- Huge success of syringe access
  - Ease with which could build on existing services
- Obvious & unaddressed need
  - Risk-reduction
  - Increased engagement
  - Expanded service provision
- material distribution to crack smokers addresses these needs, so should be significantly expanded

### Crack Kits

