



Surging HIV Rates Force a Closer Look at Harm Reduction in West Virginia

With 73 confirmed cases in Cabell County, residents and officials reconsider needle exchange programs.

August 21, 2019 By [Trent Straube](#)

As the number of HIV cases in Cabell County, West Virginia, climbs to 73 as of August 19, a county official requested an audit of the harm-reduction program at Cabell-Huntington Health Department, [reports The Associated Press and WSAZ News](#).

“We want to know, Is it working,” said county commissioner Kelli Sobonya, who requested the audit of the needle exchange program. “When you have several harm-reduction programs in the state and [the] program in your county is dealing with the only known HIV cluster in the state; when you have more HIV cases in your county, more than all of the other counties combined, that shows there is a structural problem within this program. We just want answers.”

The Department of Health and Human Resources denied the request, saying that audits were undertaken when potential problems were related to a program’s financial state. Sobonya is now requesting the governor step in and require an audit.

The HIV rates in Cabell County, like those throughout the rural state and nearby Ohio and Kentucky, are related to injection drug use stemming from the opioid epidemic.

WSAZ reports that a needle exchange in Kanawha County, West Virginia, was shut down after an audit showed “data errors leading to misinformation to the public” and “an increase of syringe litter viewed as a threat to public safety.”

Even though research and data show that needle exchange programs do work, they remain controversial for some.

“Beyond prevention, it is important to note, especially with rising numbers of cases, that Harm Reduction Program Services are one of the most critical and essential tools for addressing HIV clusters,” noted the DHHR in a statement. “Unnecessary disruption of the same would put Cabell County citizens at increased risk of disease and decrease the number of individuals linked to recovery services through these programs.”

Health officials in these rural states tell [WFPL News](#) of Louisville, Kentucky, that they fear a community backlash might jeopardize the future of needle exchanges right when they are needed most. Other officials report that they're finding growing support for harm reduction.

According to WFPL, the National Harm Reduction Coalition says that for every program that is closed, 20 more open. Kentucky, for example, is seeing an increase in harm reduction programs.

Health officials do not want to see a repeat of Scott County, Indiana, where an HIV and hepatitis C outbreak occurred about five years ago. The delayed response of then-Governor Mike Pence fueled the outbreak, in which about 215 people who inject drugs contracted HIV. For more about that, click [here](#).

As a result of the Indiana infections, the Centers for Disease Control and Prevention (CDC) in 2017 warned that [220 other counties](#) in the United States were at risk for similar outbreaks of HIV and hep C driven by injection drug use. Recently, smaller outbreaks have been reported in [Ohio](#), [Kentucky](#), West Virginia, [Massachusetts](#), [Seattle](#) and other locations.

For a recent, related POZ articles, see "[What Convinced Florida Republicans to Expand a Needle Exchange Program?](#)" and "[CDC Director Visits Ohio to Share Ideas for Ending the HIV Epidemic.](#)" For a roundup of related articles in POZ, click [#Needle Exchange](#).