

# Needle Debris, Pick-Up and Return Rapid Assessment 2025

Healthy Sexuality and Harm Reduction, WRHA, Winnipeg

## Partners in Needle Pick-up

## Partners in Supply Distribution

## Harm Reduction Supply Program Participants

Needle debris/inappropriately disposed needles is an ongoing issue of concern for the public. Healthy Sexuality and Harm Reduction (HSHR) supports a number of initiatives for addressing publicly disposed needles. Amongst these, HSHR provides supplies and information to community patrol groups in needle pick-up/sweeps activities. Further, sharps containers for distribution to clients are available across harm reduction supply distribution sites. Sites have access to supplies for managing needle returns from clients.

HSHR will collect needles in private properties. It also collaborates with 311 (City of Winnipeg) for managing disposed needles when found in public property.

In the past year HSHR has observed a decrease in sharps containers going to needle pick-up groups as well as in needles returned to Street Connections. With this in mind, we decided to carry out an assessment to learn about needle pick-up and return activities and practices across the different actors involved with Healthy Sexuality and Harm Reduction/Street Connections. The ultimate goal is to inform possible actions for improving proper needle disposal.



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## Acknowledgments

We appreciate our survey participants for answering our questions.

To community members who provided in-person information we deeply appreciate for providing great insight into your lived experiences.

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[www.streetconnections.ca](http://www.streetconnections.ca)

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## Objectives

- To assess the current needle pick-up activities by HSHR/SC partners in needle pick-up
- To assess needle-return by HSHR partners (those identified as needle drop off/return sites)
- To inform local appropriate needle disposal approaches

## Methodology

We conducted surveys with needle pick-up groups and with partners in supply distribution with which HSHR has an established partnership. The surveys were conducted over Nov 2024-Jan 2025.

A series of open-ended questions were sent to 13 needle pick-up groups, with 9 respondents providing insights into their activities. Fifty partners in supply distribution were invited to complete a survey, with 15 sites responding to our inquiry.

As per feedback from community members seeking out harm reductions supplies, we conducted a quick reconnaissance by asking a question on their needle disposal practices at HSHR office and in the van for a short period of time at the end of 2024. In January 2025 we held a group discussion on the topic at HSHR monthly Community Advisory meeting.

# Partners in Needle Pick-up

Among the respondents were representatives of non-profit associations of business owners in Business Improvement zone (BIZ), and non-profit community organizations. Some of the needle pick-up programs are mostly supported by volunteer community members. It is important to note that these organizations or programs do not exclusively collect needles. Needle retrieval is one activity among their overall community safety goals.

About half the respondents described the area or areas of the city they patrol in broad terms such as City of Winnipeg (1), Downtown (2), North End, West Broadway, Tyndall areas (1).

The rest of the respondents were more specific by describing specific streets, key landmarks or locations. Among these, some mentioned overlapping streets in Downtown neighborhoods such as West Alexander, Central Park, Centennial, China Town, Civic Center, Exchange District and South Point Douglas. A group focused their efforts in the West End neighborhoods. And another one, in select locations in the Elmwood area (around the Louise Bridge area).

All but one group patrol their area on an ongoing basis. These groups would do so 1 to 7 days a week. A few groups will seasonally modify their hours of operation – with patrolling at later hours of the evening in the summer. Two respondents indicated that their groups patrol in evening hours; 3, indicated patrolling during regular office hours. The rest did not specify hours of the day they operate on the streets.

Organizations surveyed have been collecting needles from 2 years to 20 years in Winnipeg.

## Volumes of needles picked-up

Participants provided estimated or precise number of needles picked-up. The numbers of needles collected on a monthly basis by different groups ranged from 30 to 7500. One group estimated what they would collect when their program is active during the summer (i.e., 100 needles/monthly).

Two-third of the respondents indicated to collecting under 400 needles a month (from as low as 30 to 320).

As per the other one-third (n=3), their estimates ranged from 1500 to 7500 needles monthly. Among these one of them would collect needles as part of their patrol area throughout Downtown Winnipeg, another one will mostly collect around areas with larger concentration of unhoused individuals, and the last one would collect in the North End and West Broadway areas.

Those operating for more than 10 years are the ones that also estimated the largest number of needles collected.

A rough estimate of needles collected by all these groups combined would amount to **140000 to 145000 annually**.

Some of the participants indicated having not observed changes in needle debris found on the streets lately. Yet, some of the respondents mentioned seasonal changes as affecting their needle pick-up activity, with less needles collected or finding needles concentrated in locations sheltered from the elements in the colder months. Yet, a few participants indicated that they have been finding fewer needles in areas where in past years they would have found larger amounts, including in summer months.

# State of Needles Found

Participants described finding needles in bus shelters, around benches, under bridges, in parks, in and around encampments, back lanes, and to less extent hidden in places such as ventilation systems. **Most of the time needle debris appeared to be as a one-off used needle. Larger quantities of needles appeared to be usually found along riverbanks.** A few participants also mentioned that sometimes they would find unused wrapped needles, often in larger quantities than when used needles are found.

One of the respondent noted that most of the used needles collected are found “capped”. Another respondent indicated that occasionally needles are found inside plastic bottles.

Another participant noted that in the past they would have identified a few properties where they would collect inappropriately disposed needles from; however, this is not the case anymore. At this point in time, encampments and surrounding locations appeared to be key locations for needle pick-up.

## Final Needle Disposal

For the most part, needle pick-up groups (over 75%) would bring needles they collect to Healthy Sexuality and Harm Reduction/Street Connections office.

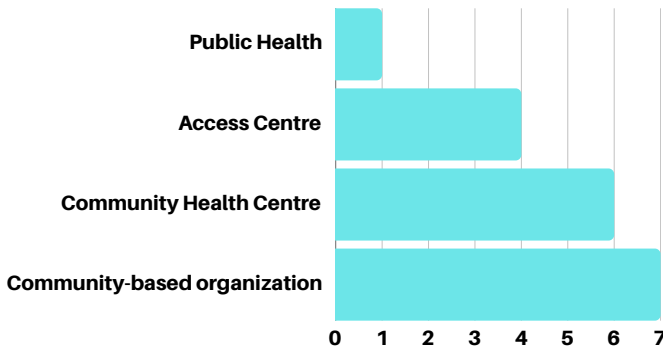
One group would bring their needles to another community site, which they indicate would dispose of the needles through a contract with a medical waste disposal company. Another community partner would bring their needle debris to a pharmacy for final disposal.

## Improving Needle Disposal Practices

**Most participants provided insights into potential actions to improve needle disposal in the areas they patrol. Among these were:**

- **more outdoor sharps disposal containers - throughout downtown.**
- **permanent street disposal containers in areas where people who use substances tend to congregate.**
- **access to and maintenance of needle disposal containers in encampments.**
- **timely maintenance of vandalized outdoor needle disposal containers (e.g., the outdoor needle disposal at Louise Bridge was removed and not replaced).**
- **regular needle sweeps in parks.**
- **financial support for volunteer community patrolling and needle pick-up.**
- **improved access to sharp disposal to community members to use independently of regular clean-up programs or activities.**
- **further involvement of supply distribution sites in needle-pick up in areas where they distribute.**

# Partners in Supply Distribution



Although about a quarter of all potential respondents participated in the survey, those who participated reflected most of the types of organizations involved in harm reduction supply distribution.

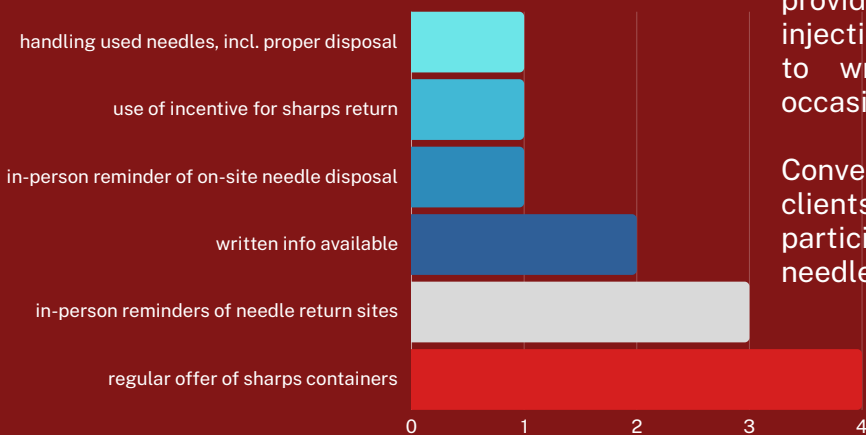
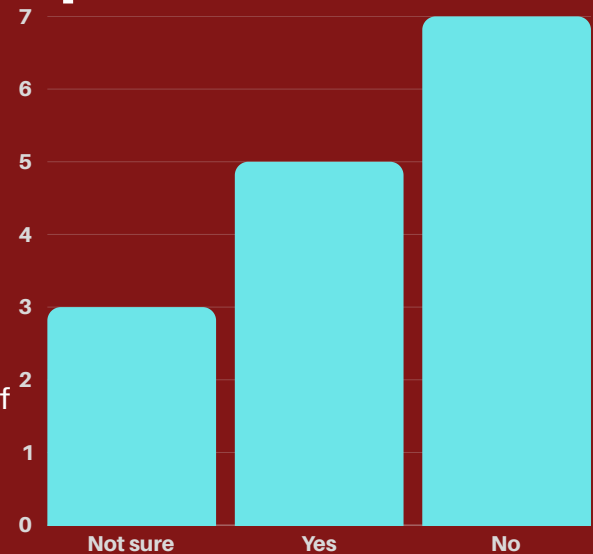
We received responses from 6 Community Health Centers (CHC), 7 community-based organizations, 1 Access Centre, and 1 public health office.

Over 85% of the respondents indicated that their agencies receive needle returns. Notably, one of the agencies that does not receive needles from clients operates a clinic with infrastructure to manage needle disposal.

## Communicating about needle disposal

About half of the respondents did not provide information on needle disposal to their clients.

Respondents that provided information on needle disposal to clients coming for supply distribution shared what they told clients. Offer of sharps containers was the most common information shared. They would also remind clients of where to return needles. To a lesser extent access to written information on needle disposal, reminders of on-site loose needle disposal, and information on handling of used needles were mentioned. One respondent informed of the use of incentives for needle return.



For the most part information on needle disposal was provided verbally when people are seeking out safer injection supplies, or “on demand.” Provision or access to written information was mentioned in fewer occasions.

Conversely to what sites would actively share with clients, we asked participants to tell us what program participants would share with staff with regards to needle disposal.

# Barriers to proper needle disposal

Respondents identified timely access to proper disposal in public spaces as a major barrier to proper needle disposal in public areas. Participants indicated that there are fewer options for people to dispose of needles on the streets. A participant shared that needles are found around their site when not open, suggesting a lack of infrastructure to encourage proper disposal. Some respondents indicated having requested for disposal units for addressing such situations.

Lack of information on where to dispose or bring needles for disposal was also mentioned as barrier. Participants suggested accessible information of list of agencies or locations where people can bring their used needles.

Houselessness and stigma were key structural barriers also mentioned. More specifically, respondents described that carrying used needles back to sites, in yellow containers, would reveal substance use, and potentially translate into stigmatizing behaviors toward them.

## Supporting community clean-up efforts

**The majority of the respondents indicated that they conduct needle sweeps in the areas in which they operate. These activities will range from seasonal clean-ups (e.g., annual spring clean-up with community volunteers), to regular clean-ups whenever doing outreach work, to hosting or collaborating with community patrols with regular scheduled walkabouts.**

**In a few cases, the organization will support locally established or seasonal/occasional groups doing community clean-ups. In these cases, they will supply organizations with sharps containers and would receive and dispose of these containers. Two respondents also mentioned to collaborating with City in their efforts to dealing with improperly disposed needles.**

## Improving Needle Disposal

We asked participants to share any ideas that could help with proper needle disposal in Winnipeg. Among the ideas were:

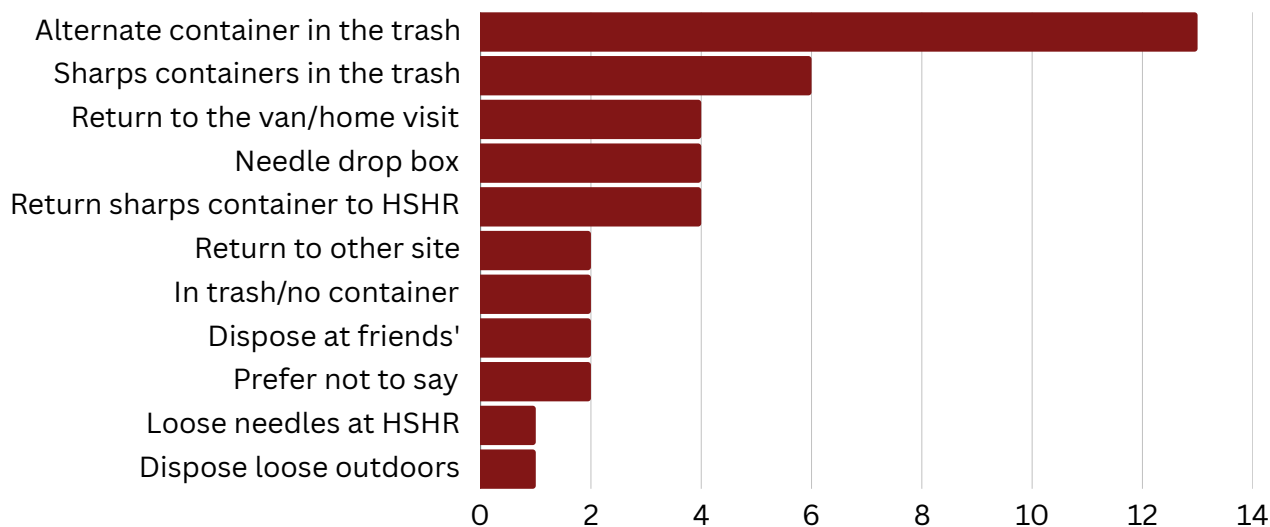
- **information on how and where to dispose nearby where people use substances**
- **access to sharps disposals in public areas**
- **access to sharps in private spaces (e.g., washrooms)**
- **ensure that people seeking out safer injection supplies are consistently offered sharps containers and with that information on where to dispose of needles/containers**
- **access to smaller sharps containers**
- **offer incentives for returns**
- **ensure stigma/judgment-free environments**

# Harm Reduction Supply Program Participants - Needle Disposal Practices

Later in November and into December 2024, program participants seeking safer injection supplies in the office and the van answered a quick question on their regular needle disposal practices. Twelve (12) participants in the van, and twenty-four (24) in the office responded the question.

As illustrated in the graph below, most participants reported appropriate needle disposal practices. The most prevalent mode of used needle disposal reported (n=45 or 49%) was putting used needles into an alternate puncture proof container (non-approved sharps container), and disposing of the container in the municipal garbage (n=13 or 36%). This was followed by disposing used needles in approved sharps containers in the municipal garbage (n=6 or 16.5%). The next most common modes were returning needles (in approved sharps containers) to Street Connections van or the office at 496 Hargrave (n=4, or 11%, respectively), with a same proportion indicating using needle drop boxes.

A few participants would describe their disposal practices as inappropriate, such as discarding outdoors or placing loose needles in the trash. All reported modes of used needle disposal are included below.



Staff noted that information on options for appropriate disposal was shared with participants with emphasis on needle return to Street Connections.

## Needle Disposal Practices Explained

To further understand needle disposal practices, we elicited feedback from participants at our regular Community Advisory Group in January 2025. Three participants were in attendance that day; however, the topic generated many insights on the matter.

Among the most common practices among people who use drugs described by program participants at this group were:

- The use of plastic/pop bottle to store used needles. Small containers such as this type of containers were easier to carry or have around for people living outdoors or tents.
- People may also store needles, loose or tied with tourniquets, in garbage bags. This suggests actual barriers to proper needle disposal. However, the use of small plastic bags was preferred when living in a tent where there is no proper lighting to stick needles in a sturdy container.
- Participants would also drop used needles on sharps containers available in washrooms (e.g., Street Connections, Siloam, Nine Circles).
- Outdoor needle drop boxes were also an option, but not as frequently mentioned/used for the participants in this group.
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In all, participants disliked when needles are found or discarded on the ground. They emphasized the need for needle pick-up or proper disposal.

Descriptions on needle re-use by one of the participants demonstrates a major barrier to the use of a new/sterile needle every time. While the participant seemed to understand that there were negative health outcomes associated to re-using a needle (e.g., injecting particles, bacteria, etc.), the fact that they could still draw drugs (and “get high”) from what was left in the syringe was attractive to this participant.

## Knowledge on needle disposal

When asked where people who use substances can access information on how to dispose of used needles, the following sources of information were mentioned:

- Street Connections newsletter
- Information from staff at harm reduction supply distribution site (a participant mentioned a specific site) – appreciate having the opportunity to speak with someone in the moment.

However, questions about needle return revealed important gaps in knowledge of what to do with collected used needles. Participants asked if sites would accept large number of used needles, and what options they had for getting these needles to sites. Further, one participant asked if they could return needles at HSHR/Street Connections office, illustrating the need to better inform of the options for needle return to program participants. Needle return to HSHR is possible.



# Improving Knowledge on Needle Disposal

Participants appreciated some sort of printed material (e.g., pamphlet, leaflet, brochure) with information on needle disposal.

As per the content of such resource, participants discussed what to do with used needles per se. They suggested that “recapping” the syringe was a common practice among people handling their own syringes. However, participants mentioned that they would lose the caps preventing them from consistently being able to recap their needles. Some would break off the syringe tips to prevent needle injury or re-using. Participants noted that information on such practices can be included in education materials. As much as these practices are intended to prevent needlestick injuries, recapping of needles can increase the chances of needlestick injury. The inclusion of this information in support of needle disposal practices can be problematic.

We also asked participants to share ideas on what would help people remember how to properly dispose of needles. In this regard, participants suggested better tamper-proof sharps containers, smaller sharps containers to be able to carry on the person, larger needle disposals in obvious locations, and clear messaging as to why it is not appropriate to leave used needles exposed.

As part of the process, we asked participants to assess an old resource (i.e., sticker) designed for anyone that finds a needle on the street.

Participants liked the resource as it:

**“Straight to the point, like the WRHA label is on there. It helps injection drug users with stigma from it getting pulled out from the shadows of doing it. Makes people think it is not as big of a deal.”**

**“[It] takes away from the stigma of people using syringes, would like to see it posted around the city more.”**

## Incentivizing Needle Return

A participant recalled that in the past program participants had the chance to get gift cards for returning used syringes. That activity would have not only provided an incentive, but also create awareness on needle disposal. Other participants believed that “bringing the rebate program back” was a good idea.

# Needle Debris Pick-Up and Return

## Conclusions and Ideas for Action

Partners in needle-pick up and supply distribution and program participants shared a common support and interest in ensuring that needles are appropriately disposed in the community. For the most part respondents from each of the respondent groups provided insights on their efforts towards this objective. Access to supplies and information was available; however, many gaps and opportunities for improvement were shared. Most notable is that program participants may not know about needle disposal practices, including how and where to dispose of their needles.

- **Promote stigma/judgment-free environments**
- **Refresh needle pick-up/needle found poster/sticker, and ensure its distribution**
- **Ensure that all program participants seeking safer injection supplies are offered sharps containers**
- **Ensure sharps containers are distributed along with information on how to properly dispose of them**
- **Improve access to information of needle disposal locations as program participants may not have access to Street Connections' online interactive map**
- **Create material for partners receiving returns - what to tell clients on how they can return needles**
- **Consider “bringing back” the needle return draw to enhance opportunities for conversations on proper needle disposal, and along with that on safer injection practices**
- **Consider improved promotion of access to sharps containers for community groups conducting regular needle sweeps**
- **Improve access to sharps disposal in public areas**
- **Discuss with the City of Winnipeg enhanced options for needle and other sharps objects disposal, and the maintenance of sharps containers in parks**