



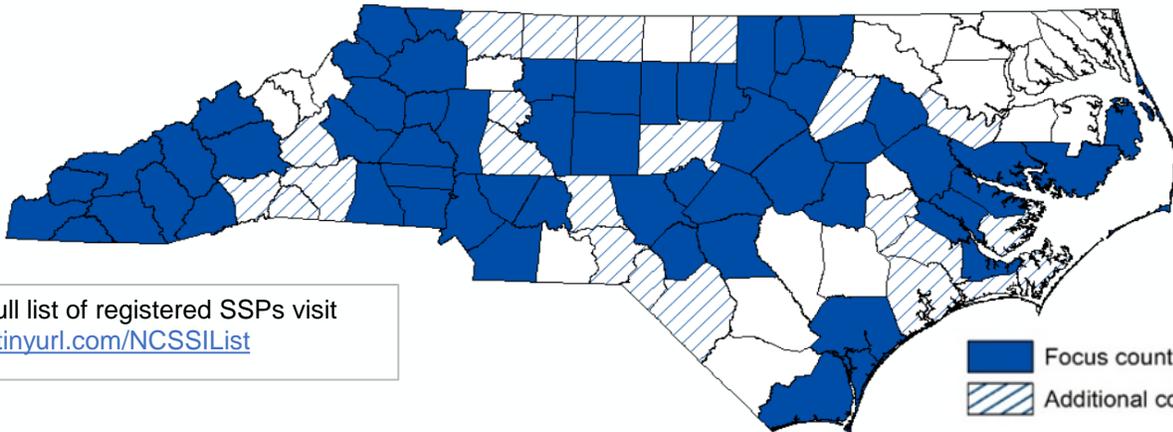
# NC Safer Syringe Initiative Annual Report, 2019-2020

Syringe services programs (SSPs) are an evidence-based strategy to reduce overdose deaths, reduce transmission of blood-borne pathogens including HIV and hepatitis C (HCV), and connect participants to treatment and care. SSPs provide a variety of social and health services for people who use drugs, often serving as the primary avenue to meet their health needs. They offer sterile syringes and disposal services to remove hazards from the community, prevent sharing and reuse of syringes, provide wound care, distribute naloxone, and offer many other wraparound services. This report summarizes data reported to the Division of Public Health (DPH) from all SSPs active in North Carolina about their services. North Carolina law (G.S. 90-113.27) allows for the legal establishment of hypodermic syringe and needle exchange programs.<sup>1</sup>

The 2019-2020 reporting year includes four months of the COVID-19 pandemic, which significantly impacted the way SSPs provide services across the state. The majority of programs in NC remained open but had to adapt their services, such as adding delivery services and/or offering a curbside pick up model. In addition to increasing overdose trends, programs have also reported an increased need for their services by seeing more participants than they did before the pandemic.

<sup>1</sup> Visit <https://tinyurl.com/NCSSPLaw>

## NC Counties Served or Reached by Registered Syringe Services Programs, 2019-2020



There are **38 Syringe Services Programs** directly serving **55 counties and one federally recognized tribe** across NC, and used by residents of **24 additional counties**. Among those benefiting from these services are visitors to NC from AL, FL, GA, NY, PA, SC, TN, VA, GA and The Netherlands.

Registered SSPs are serving an **additional 13 counties**, compared to the 2018-2019 reporting year.

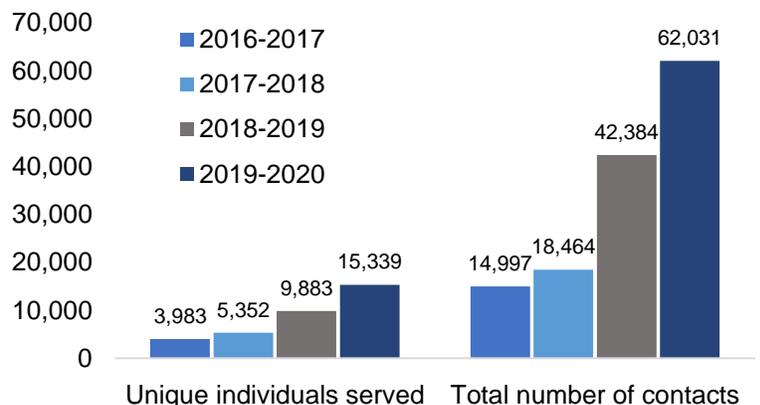
Of these 38 SSPs, 10 operate a fixed-site location, 11 provide mobile services, eight use peer-based services, eight operate in an integrated service model, and seven provide delivery-based services. \*Many SSPs utilize more than one model.

## SSP Participant Numbers, 2019-2020

Since the previous reporting year, the number of contacts programs had with participants **increased by nearly 50%**.

The number of unique individuals served has **increased by 55%** since the previous reporting year.

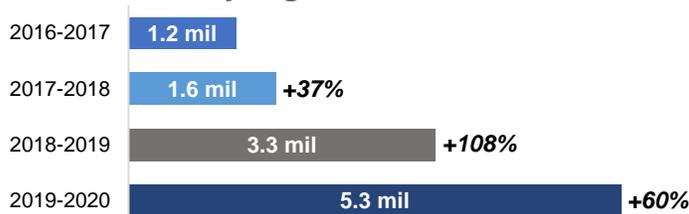
In 2019-2020, programs provided participants with a total of **2,789 referrals** to substance use treatment.



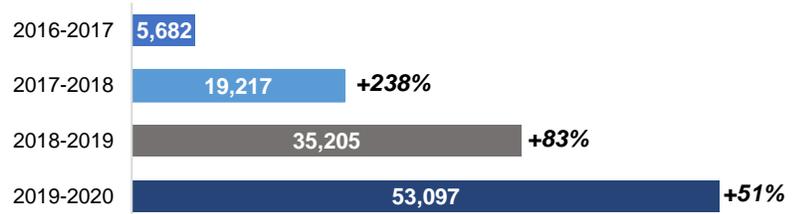
## Supply Distribution, 2019-2020

During 2019-2020, **5.3 million sterile syringes** were distributed by SSPs, a **60% increase** from the previous year. Additionally, SSPs distributed over **53,000 naloxone kits**, over **51% more** than the year before.

### Syringes distributed



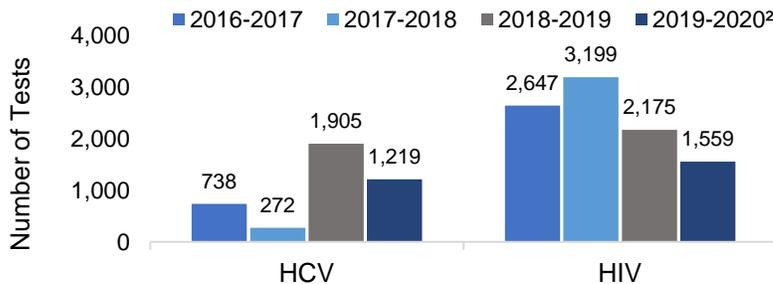
### Naloxone kits distributed



A key purpose of SSPs is to provide participants with sterile syringes and facilitate safe disposal of syringes. For more information about ways to safely dispose of syringes, visit <https://tinyurl.com/safeneedledisposal>.

SSPs establish trust with their participants and regularly engage with frontline communities responding to drug overdoses. Naloxone distribution, particularly to community members at high overdose risk, along with their families, is safe and cost-effective in reducing overdose deaths. Over **8,600 overdose reversals** were reported to SSPs in 2019-2020, an **80% increase** from 2018-2019. This is an underestimate of overdose reversals, as many are unreported.

## Communicable Disease Testing, 2019-2020



<sup>2</sup>HIV and HCV testing at SSPs stopped in March in response to the COVID-19 pandemic and has not yet resumed in most programs, resulting in the 2019-2020 decline seen here.

Sterile syringes are a key tool in reducing the spread of blood-borne pathogens and infections, like HIV and viral hepatitis (HCV, HBV). They have been associated with a 50% decrease in HIV and HCV incidence.<sup>3</sup>

**61%** of all registered SSPs offer HIV and HCV testing to their program participants. This is a **120% increase** since the 2016-2017 reporting year.

Since the 2016-2017 reporting year, programs offering HCV testing **increased 160%**.

In the event of a positive test result, SSPs refer participants to HIV or HCV treatment providers as well as provide bridge counselors/linkage coordinators to assist with payment options, patient care navigation, and additional support such as transportation, food or housing.

<sup>3</sup><https://www.cdc.gov/ssp/syringe-services-programs-summary.html>

## DHHS Support of Syringe Services Programs

### Supports During COVID-19

DHHS ensured inclusion of SSPs as essential public health services. DHHS issued a memo clarifying SSPs' essential service status and a template memo was provided for local use. DHHS maintained ongoing communication with SSPs, sharing resources and learning local needs throughout the pandemic.

### SSP Learning Collaborative

In collaboration with NC Harm Reduction Coalition, DHHS brings SSP leaders from across the state together quarterly to share perspectives, build capacity and skills, and discuss ongoing work and program planning.

### Opioid Action Plan SSP Advisory Group

DHHS meets monthly to discuss and receive feedback from people who have lived experience of drug use and/or are directly impacted by the overdose crisis.

### InjuryFree NC Academy on Establishing SSPs (<https://tinyurl.com/IFNC-SSP-Academy>)

In partnership with the UNC Injury Prevention Research Center, teams of across the state attend an interactive training on establishing syringe services programs, including an overview of harm reduction, SSP legality, day-to-day operations, and lessons learned from those operating SSPs in NC. To respond to COVID-19, this Academy was offered virtually.

### Supply Purchase

The pandemic posed unique health challenges to SSP participants. DHHS expedited the order and delivery of supplies requested by SSPs, including naloxone kits, sterile waters, and personal hygiene and wound care supplies.

### Direct funding to Local Health Departments to Support SSPs

In December 2019, 12 of 23 local health departments that were awarded DHHS' funding for "Community Linkages to Care for Overdose Prevention and Response" included dedicated work to develop or expand SSPs in their counties.

**Source:** Annual Reporting Data, submitted by registered North Carolina Safer Syringe Initiative programs, as of June 2020

