

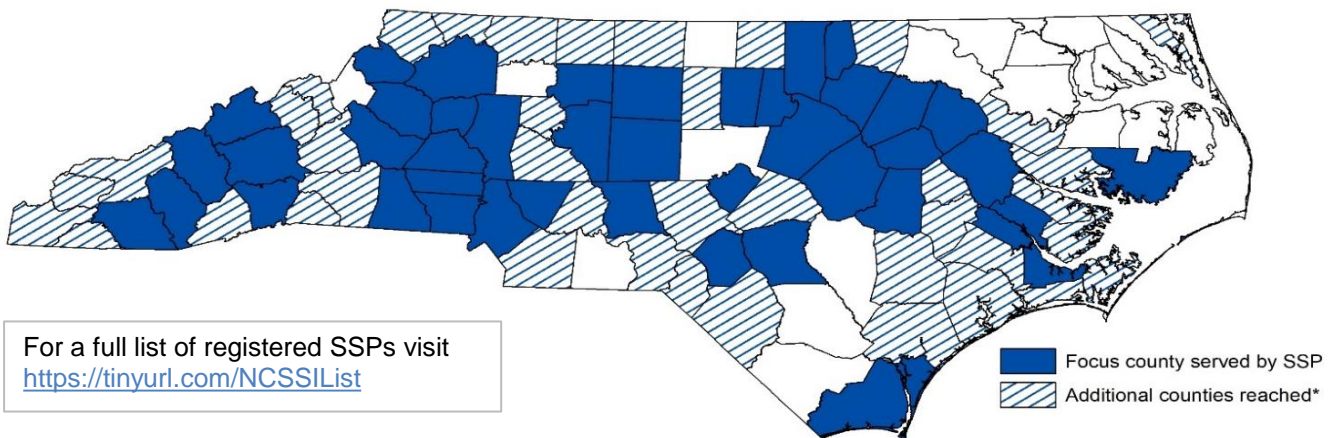
# NC Safer Syringe Initiative Annual Report, 2018-2019

Syringe services programs (SSPs) are an evidence-based strategy to reduce overdose deaths, prevent blood-borne pathogens including HIV and hepatitis C (HCV) infections, 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 and other supplies, provide wound care, distribute naloxone, and offer many other wraparound services.

All SSPs active in North Carolina participate in the annual reporting process via the NC Safer Syringe Initiative (NCSSI). This report summarizes data reported to the Division of Public Health (DPH) from SSPs about their services.

As of July 11, 2016, North Carolina (G.S. 90-113.27) allows for the legal establishment of hypodermic syringe and needle exchange programs. For more information about G.S. 90-113.27 visit <https://tinyurl.com/NCSSPLaw>.

## NC Counties Served or Reached by Registered Syringe Services Programs, 2018-2019



There are **32 Syringe Services Programs** directly serving **42 counties and one federal tribe** across NC, with 38 additional counties and three additional states (TN, SC, VA) being represented in the populations using the services.

Registered SSPs are serving an **additional 10 counties**, compared to the 2017-2018 reporting year.

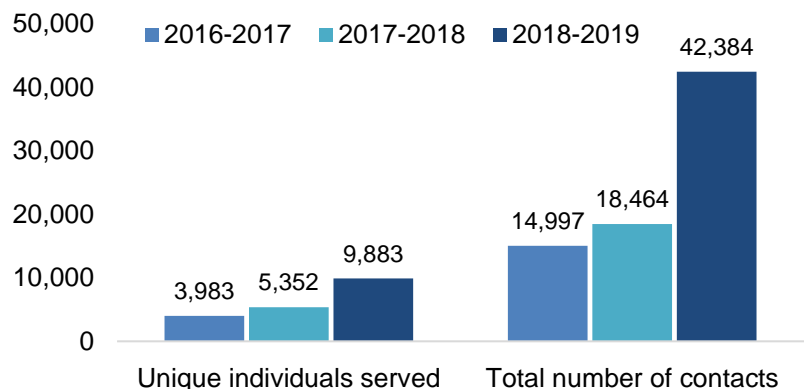
Of these 32 SSPs, 22 operate using a fixed-site location, 20 operate using mobile services, 15 operate using peer-based services, and nine operate in an integrated service model. \*Note that many SSPs utilize more than one program model.

## SSP Participant Numbers, 2018-2019

The programs in the 2018-2019 reporting year have more than **doubled** the total contacts they have with participants.

The number of unique individuals served has **increased by 85%** since the previous reporting year.

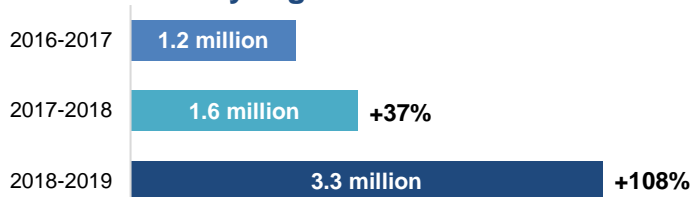
The total substance use treatment referrals by programs has **increased by more than 300%** since the previous reporting year.



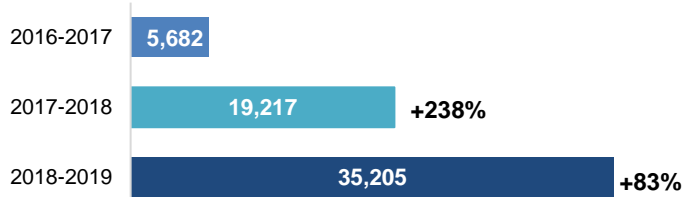
## Supply Distribution, 2018-2019

During 2018-2019, **3.3 million** sterile syringes were distributed by SSPs, **over a 100% increase** from the previous year. Additionally, SSPs distributed over **35,000** naloxone kits, which is over **80% more** than the year before.

### Syringes distributed



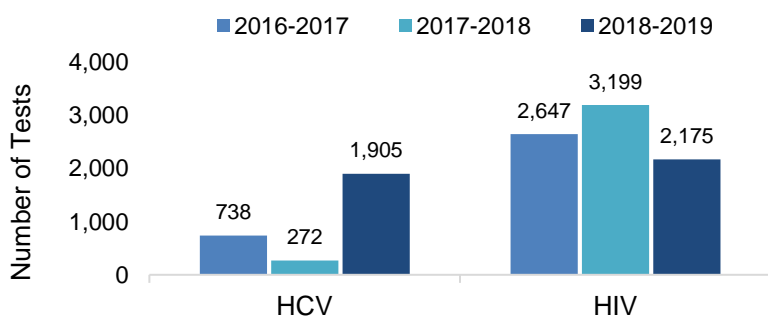
### Naloxone kits distributed



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 maintain an ongoing relationship. They regularly engage with communities at the front line of responding to drug overdoses. Over **4,800** reversals were reported back to SSPs in 2018-2019, an **80% increase** from 2017-2018. This is likely an underestimate of the total number of overdose reversals resulting from naloxone distributed at SSPs since not all reversals are reported.

## Communicable Disease Testing, 2018-2019



Sterile syringes are a key tool in reducing the spread of blood-borne pathogens including HIV, viral hepatitis (HCV and HBV), and other blood-borne infections. They have been associated with a 50% decrease in HIV and HCV incidence.<sup>1</sup>

**72%** of all registered SSPs offer HIV and HCV testing to their program participants. This is an **increase of 50%** since the previous reporting year.

Over the last year, programs offering HCV testing **increased by 600%**.

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

<sup>1</sup><https://www.cdc.gov/ssp/syringe-services-programs-summary.html>

## DHHS Support of Syringe Services Programs

### 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 with 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>)

Through a partnership with UNC IPRC, teams of people from across the state attend an interactive training on how to establish syringe services programs including an overview of harm reduction, SSP legality, day-to-day operations, and lessons learned from people operating SSPs in NC.

### Supply Purchase

DHHS donated a large portion of supplies to registered SSPs, including naloxone, test kits, sterile waters, and other hygiene and wound care supplies.

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

22 local health departments received funding to support, develop, or expand SSPs and other overdose prevention and harm reduction efforts from NC DHHS Injury and Violence Prevention Branch.

**Source:** All data is from Annual Reporting Data submitted by all registered NC Safer Syringe Initiative programs in N.C.

