



Syringe Service Programs

SSP Outcomes

- Save lives and prevent overdose.
- Onsite, as needed, counseling services depending upon staff availability.
- A study by the National Institutes of Health found that SSPs “show a reduction in risk behaviors as high as 80 percent in injecting drug users...”
- SSP participants have been found five times more likely to enter drug treatment than those who had never used an exchange.
- SSPs throughout the country have reduced HIV transmission rates by one-third to two-fifths.

Syringe Service Programs: Gold Standard

- Provide access to free sterile syringes and other injection equipment, safe disposal of used syringes, and syringe exchange
- Provide other health and supportive services
 - ▣ Comprehensive risk reduction counseling
 - ▣ HIV and viral hepatitis screening and referral to treatment
 - ▣ Referral to substance use disorder treatment
 - ▣ Referral to medical and mental health care
 - ▣ Overdose prevention
 - ▣ Narcan distribution
 - ▣ Wound care

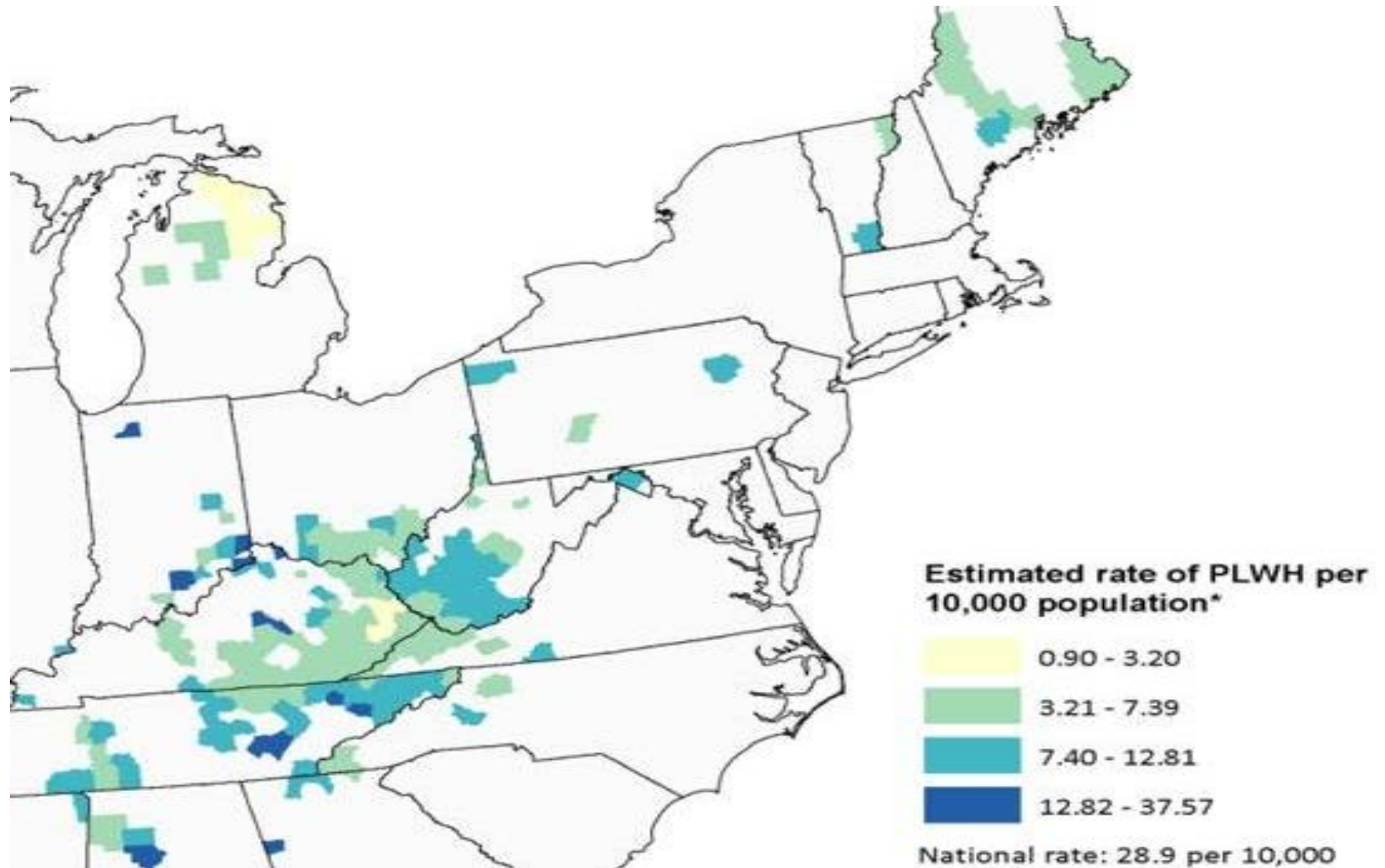
Sample of an agencies' Performance Measures

- ❑ The grantee will provide secondary exchange to a minimum of 1,500 people per quarter.
- ❑ At least 225 unduplicated members will access the syringe exchange each quarter.
- ❑ At least 62 new syringe exchange members will be registered per quarter.
- ❑ At least 25 will receive HIV counseling, testing, and referrals per quarter.
- ❑ At least 187 members will participate in one-on-one HIV prevention information sessions during the grant period.
- ❑ 100% of SSP members will be offered informational brochures in the context of a conversation about treatment options.
- ❑ The grantee will offer 100% of clients to HIV and hepatitis C testing.
- ❑ Grantee will have HCV promotional materials on testing sites and referral resources available during 100% of daily operating hours.

History and Context for SSP's

- First established in late 1980s in response to the HIV epidemic
 - ▣ 204 known SSPs in the US in 2013¹
- Compelling evidence of SSPs effectiveness, safety and cost-effectiveness for HIV prevention among PWID²
 - ▣ Reduction in injection risk behaviors
 - ▣ Reduction in HIV incidence
 - ▣ No increase in drug use (e.g., no increases in initiation, duration or frequency)
 - ▣ Additional benefits (e.g., enrollment in substance use disorder treatment, higher HIV treatment retention, reduced needle stick injuries among first responders)
 - ▣ Reach beyond enrolled SSP clients through secondary exchange and peer outreach
- 2015 HIV Outbreak in Scott County Indiana

HIV Vulnerability Study



History in Vermont

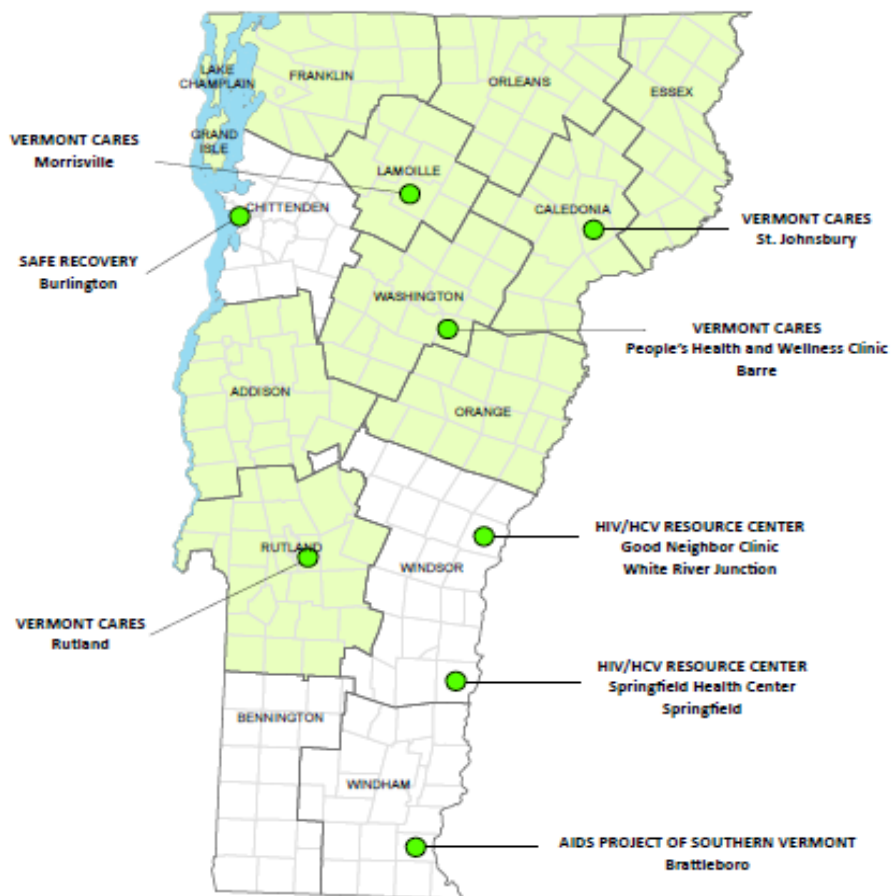
HIV prevention tools evolve throughout history

- Vermont's first AIDS Service Organization founded 1985
- Condom distribution begins in 1985
- HIV medical care center established in 1988
- First HIV test delivered in the field in 1991
- Vermont's first Syringe Service Program 1998
- 2013 Narcan distribution pilot project begins
- 2015 PrEP becomes a targeted intervention
- 2016 Undetectable = Untransmittable
- 2018 Comprehensive Syringe Service Program Working Group established
- What is next????

General Statistics

- ❑ One in 15 HIV diagnoses of HIV are among People Who Inject Drugs (PWID) in Vermont.
- ❑ According to the CDC at best, 1 in 4 PWID get all their syringes from sterile sources.
- ❑ Among individuals that do not have access to a sterile source of syringes, 41% share works
- ❑ An 20,000-30,000 individuals managing opiate dependency issues in Vermont
- ❑ SSP's have access to greater than 5,000 PWID's

Vermont Syringe Service Programs



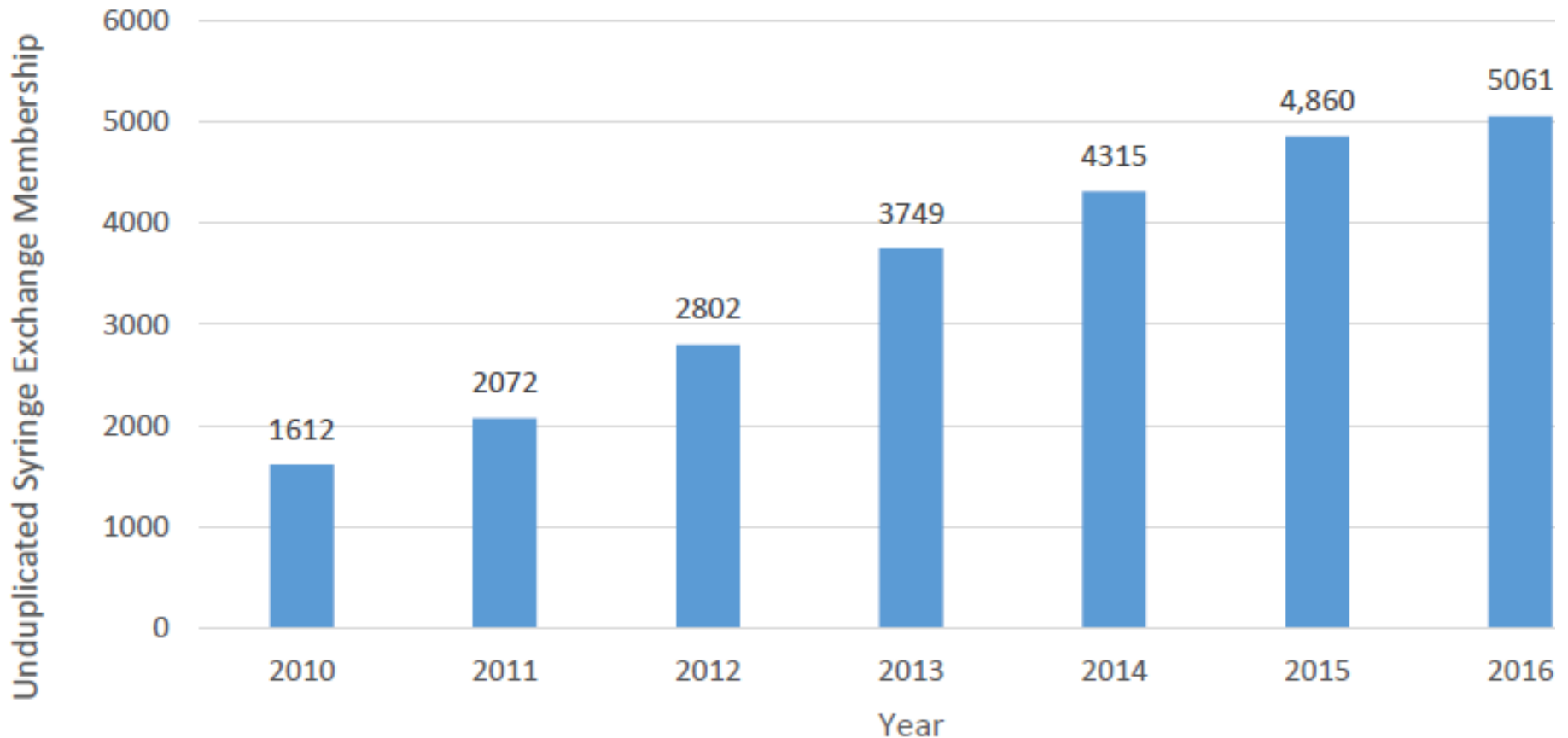
Syringe Service Program

- Syringe Exchange Locations
- Mobile Syringe Exchange Available

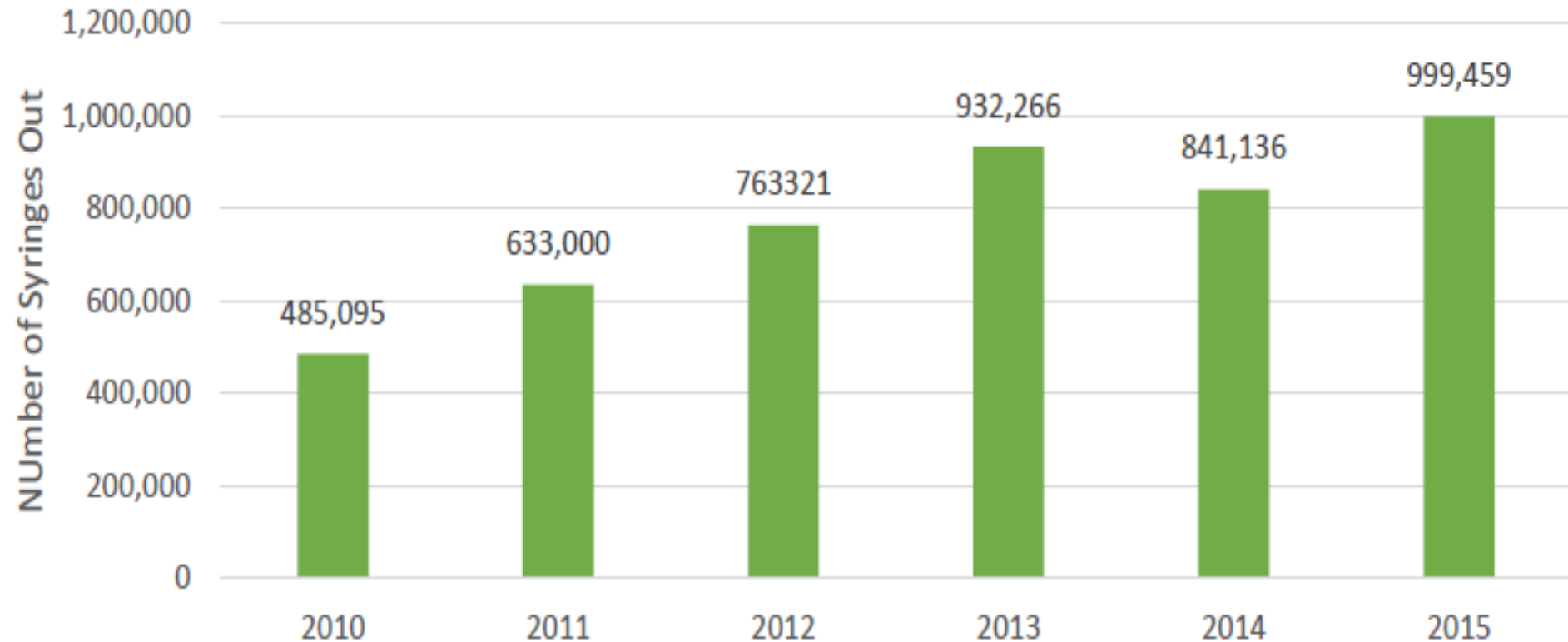
Total Syringe Exchange Membership CY 10-16

Total Syringe Exchange Membership CY10-CY16*

*Q1 of CY16 only



Total Syringes Out CY 2010-16





SSP Funding in Vermont

	Award	Population Served	Cost per Consumer	Cost per Exchange
APSV	\$29,100	102	\$285	\$1.75
H2RC	\$46,938	481	\$98	\$0.47
Safe Recovery	\$237,600	4,945	\$48	\$0.33
Vermont CARES	\$94,912	889	\$107	\$0.39
Total	\$408,550	5,061	\$80.73	\$0.38

Vermont Department of Health (VDH) Comprehensive Syringe Service Program Working Group

- First meeting 3/1/2018
- Purpose: To organize stakeholders invested in harm reduction theory, to evaluate Syringe Service Programs as an intervention in addressing the needs of consumers who use opiates and other drugs and make recommendations to the Vermont Department of Health and other entities of how SSPs can best serve Vermonters managing various degrees opioid dependence.
- List of recommendations to be produced by 6/2018

Thank you



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