





2023 COSSUP National Forum

Championing The Power of Recovery and Hope

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Syringe Services Programs:

How Comprehensive Programs Can Change Lives

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Legislative Analysis and Public Policy Association (LAPPA)

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Learning Objectives

- After this session, participants will be able to:
 - 1. Describe the opportunities and limitations of comprehensive syringe services programs (SSPs) as a form of harm reduction;
 - 2. Assess the practical and legal implications of SSPs;
 - 3. List the elements that make up model SSP legislation; and
 - 4. Summarize an approach to building long lasting partnerships between harm reduction programs and public safety officials in order to curb the overdose crisis and create more resilient communities.



ABOUT LAPPA



501(c)(3) nonprofit organization whose mission is to conduct legal and legislative research and analysis and draft legislation on effective law and policy in the areas of public safety and health, substance use disorders, and the criminal justice system.

ONDCP's Model Acts Program Grant recipient for 2019-21, 2021-23, and 2023-2025.



Comprehensive SSPs

Facts about injection drug use

- There are an estimated 3.7 million people who inject drugs (PWID) in the United States¹
- Sharing syringes is more common among young people, with 48% aged 18-24, 44% aged 25-29, and 39% aged 30-39 reporting sharing syringes²
- PWID represent the majority of new hepatitis C viral (HCV) infections
- PWID represent 3,800 new HIV cases each year
- Only 53% of PWID reported participating in an SSP





Comprehensive SSPs

What is a comprehensive SSP?

- Provision of syringes and other injection and/or drug use supplies at no cost
- Education for participants and community members
- Syringe disposal options
- Provision of opioid overdose reversal medications (Narcan/naloxone)
- Offer expanded services either through direct provision or referral, including SUD care, treatment, and recovery services, including MAT; testing and treatment for bloodborne infectious diseases; and medical and mental health treatment



Facts about SSPs

- Participants are 5 times more likely to enter treatment³
- Participants are 3 times more likely to stop using drugs
- Participants self-report reducing or stopping injection drug use
- SSPs are associated with a reduction in fatal overdoses
- 30 years of research shows that SSPs do not increase crime
- Syringes are 8 times more likely to be improperly disposed of in communities without an SSP⁴



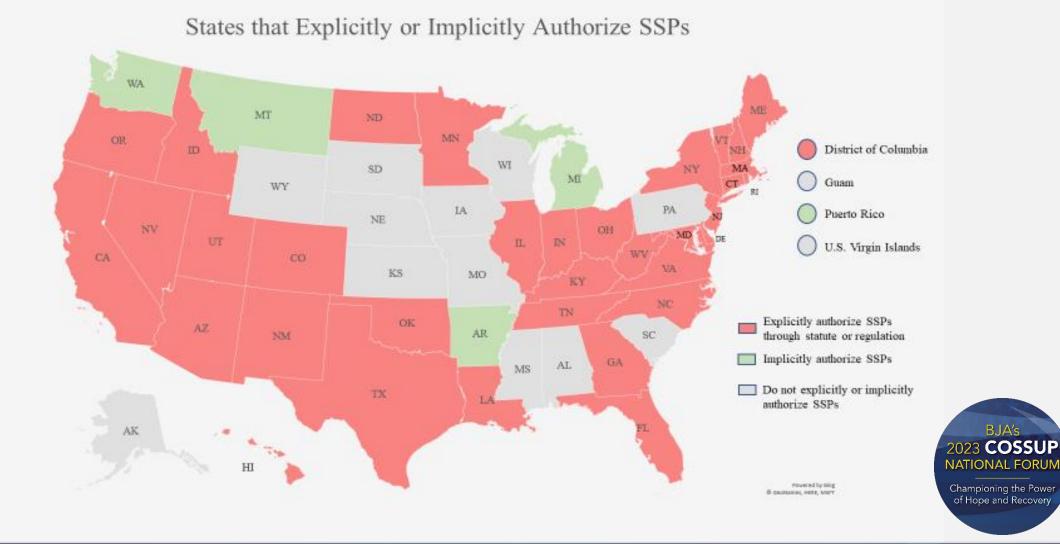
³ Summary of Information on the Safety and Effectiveness of Syringe Services Programs (SSPs), CENTERS FOR DISEASE CONTROL AND PREVENTION, https://www.cdc.gov/ssp/syringe-services-programs-summary.html

https://www.sciencedirect.com/science/article/abs/pii/S0376871611005229?via%3Dihub



⁴ Hansel E. Tookes et al., *A Comparison of Syringe Disposal Practices Among Injection Drug Users in a City With Versus a City Without Needle and Syringe Programs*, DRUG AND ALCOHOL DEPENDENCE 123(1-3), June 2012, at 255-259,

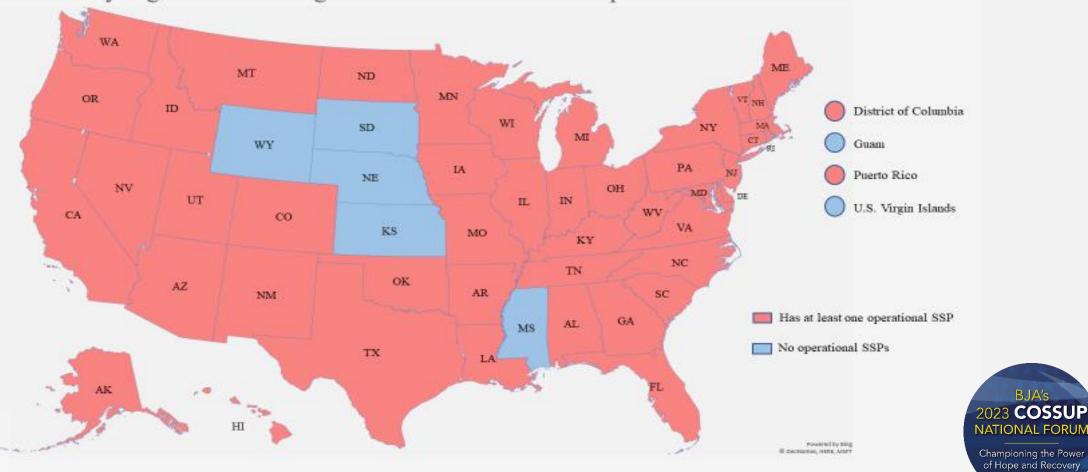
States with SSP Laws





States with Operational SSPs





BJA's

Championing the Power of Hope and Recovery

- Persistence of myths/stigma surrounding SSPs and PWID
- Community resistance
- Resistance from law enforcement
- State drug paraphernalia laws
- Onerous legal requirements for operation





Persistence of myths/stigma surrounding SSPs and PWID



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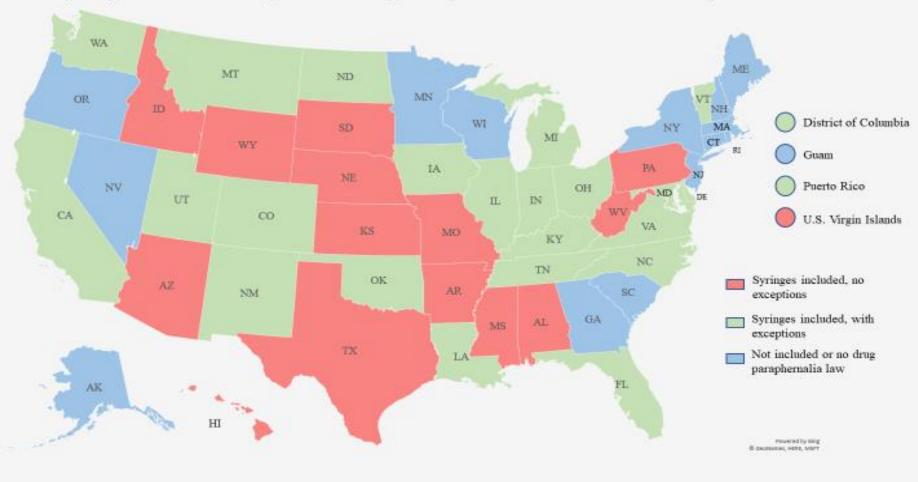
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Drug Paraphernalia Laws

Syringe Services Programs: Drug Paraphernalia Laws and Exceptions







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- Community resistance
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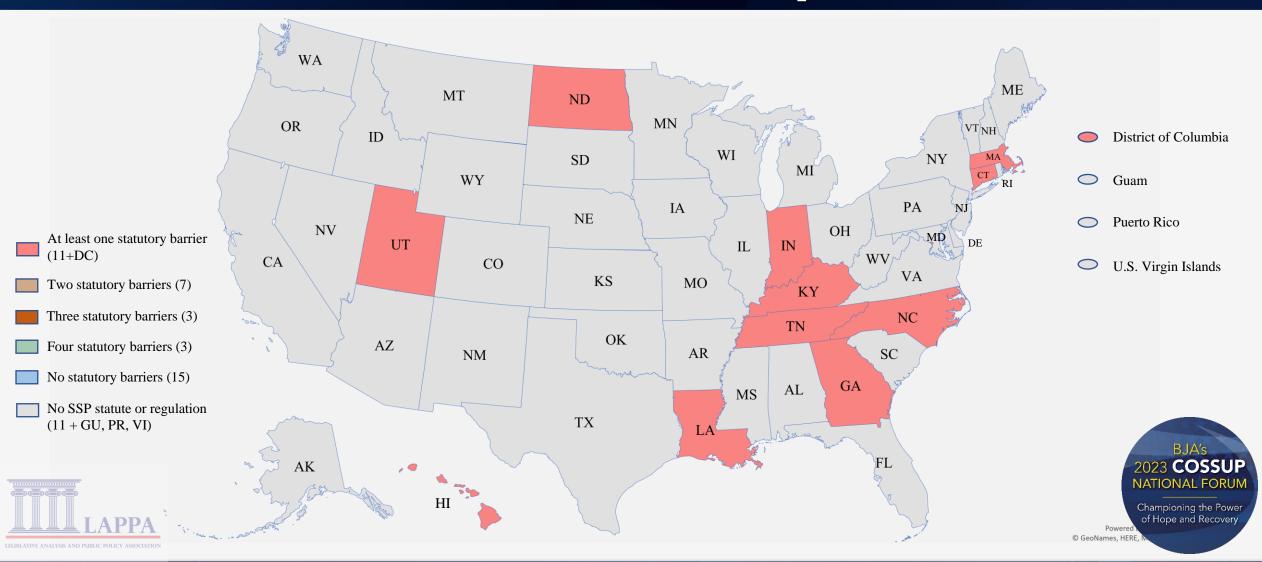


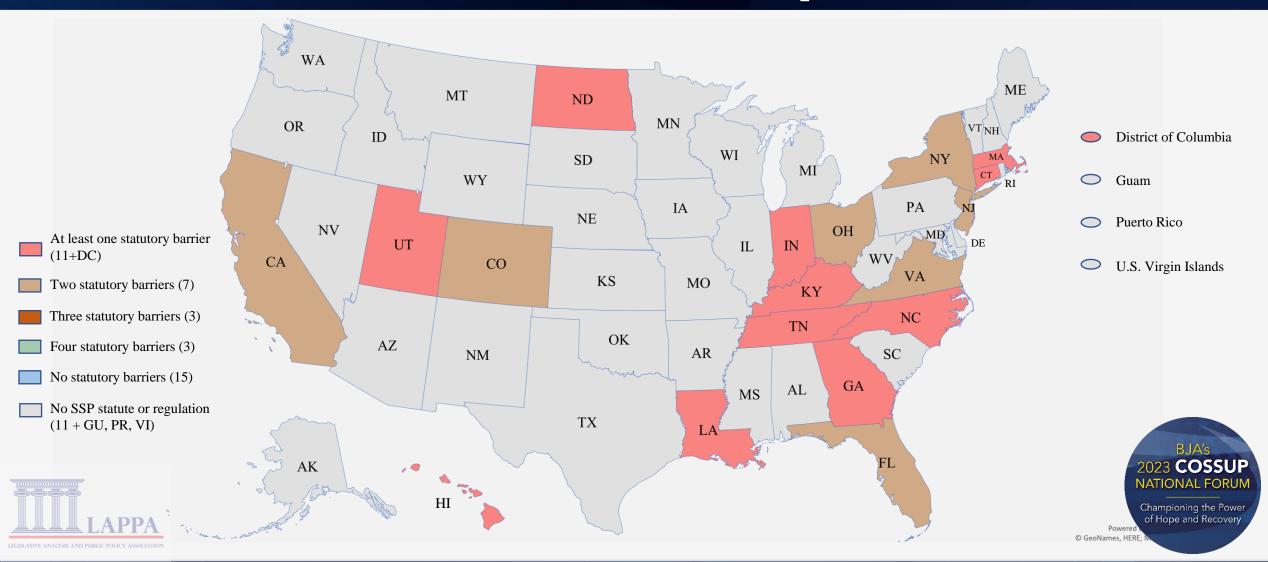


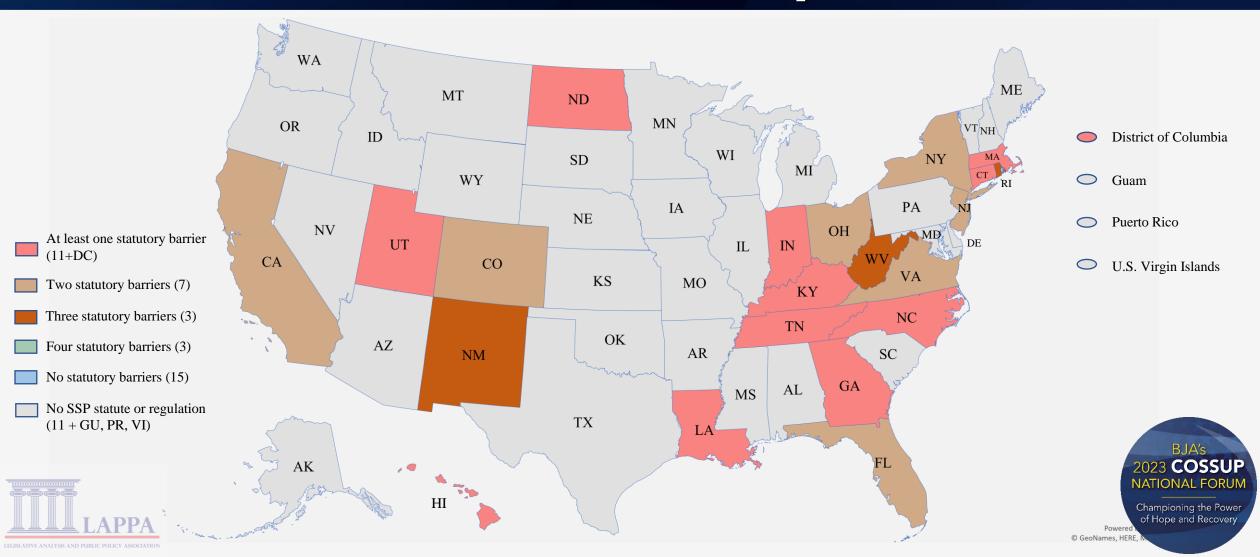
- Registration/enrollment
- Program identification
- Traceable syringes
- One-to-one syringe exchange
- Local jurisdiction control of SSPs
- Law enforcement consultation/approval

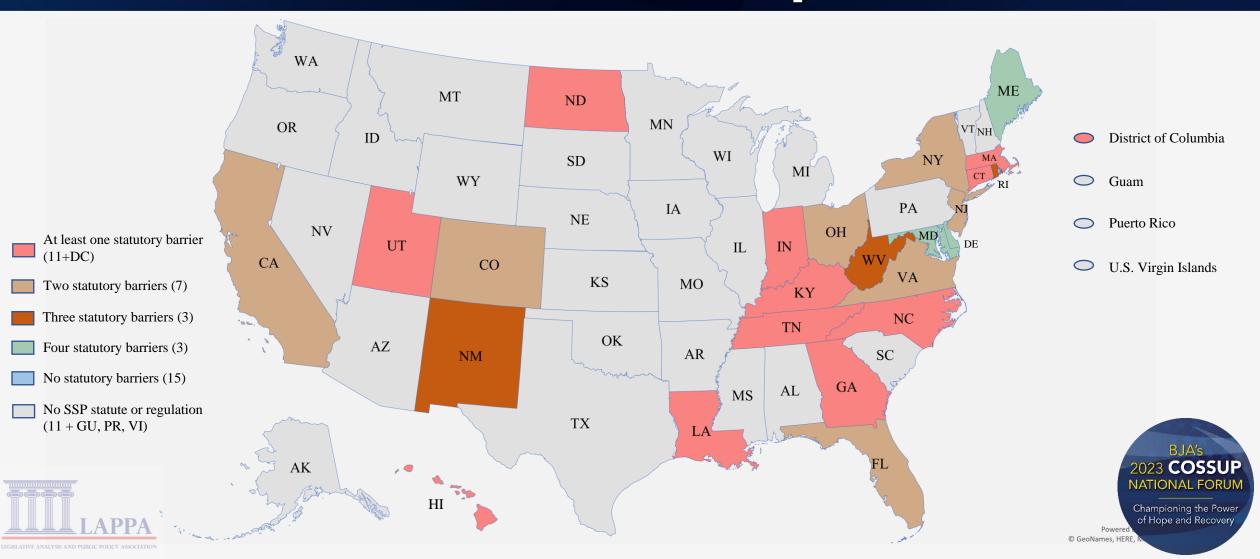


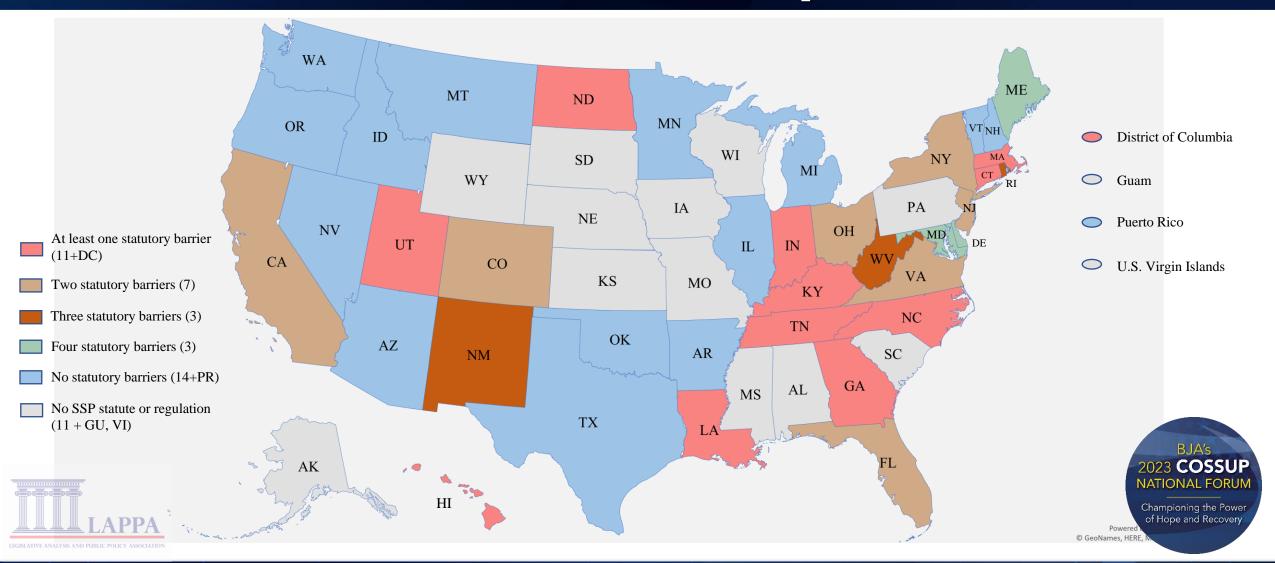












Model Syringe Services Program Act

- Address legal barriers
- Reduce overdose deaths and disease transmission
- Encourage participants to begin recovery





Model Syringe Services Program Act – Authority to Operate SSP

- Health departments, federally qualified health centers, EMS and other first responder organizations, community-based organizations, HIV/AIDS service organizations, substance use disorder treatment providers, recovery community organizations, harm reduction organizations
- Register with state department of health and human services
 - Notification and data collection purposes only





Model Syringe Services Program Act – Program Objectives

- Reduce the incidence of overdose among PWID
- Reduce transmission of HIV, viral hepatitis, and other bloodborne diseases
- Reduce needlestick injuries to first responders, sanitation workers, and community members
- Offer participants connections to other resources, e.g., treatment, peer support, recovery services, mental health care, legal services





Model Syringe Services Program Act Prohibitions

- Prohibits cities, towns, regions, counties, and other political subdivisions from adopting or enacting ordinances that prohibit the establishment of an SSP within the municipality or county
 - Cannot limit the number of supplies that an SSP can give to participants
 - Cannot place any limits on the location, hours of operation, or service provision model of the SSP
 - Cannot place any hiring restrictions, including placing restrictions on who can volunteer, or impose any other barriers on the operation of an SSP



Model Syringe Services Program Act – Program Operation

- Fixed, mobile, backpack, secondary exchange, delivery, or a combination of methods
- Allows participant registration, but only for program record-keeping or data collection purposes; registration must be voluntary
- Allows the provision of medications for addiction treatment consistent with federal and state law





Model Syringe Services Program Act – Program Requirements

- Provide hypodermic syringes and needles
- Provide participant education regarding proper disposal methods and offer disposal options
- Provide at least one opioid overdose reversal kit
- Make educational materials available
- Provide participants with program information including location(s), hours of operation, contact information, and a list of services provided



Model Syringe Services Program Act – Program Requirements

- Either directly provide or provide referrals to:
 - Testing options
 - Prevention, care, and treatment services for HIV, viral hepatitis, etc.
 - Vaccinations
 - Substance use disorder care, treatment, or recovery services





Model Syringe Services Program Act – Program Requirements

- Either directly provide or provide referrals to:
 - Drug checking services
 - Medical treatment services, including mental and other behavioral health treatment
 - Obtaining legal services, identification, housing, food, health insurance enrollment, clothing, employment, transportation, childcare services





Model Syringe Services Program Act – Miscellaneous Provisions

- Immunity for SSP staff and participants
 - Possession/delivery of syringes
 - Residue contained within a syringe
- Education and training for law enforcement and the general public
 - Effectiveness of SSPs, health and safety benefits of SSPs, legal status of syringes
- Data collection
 - Required information number of participant encounters, number of syringes distributed, estimated number of used syringes collected, number of emergency antagonist kits distributed
 - Voluntary information demographic information, number of referrals made

Resources

Model Syringe Services Program Act • LAPPA (legislativeanalysis.org)

<u>Syringe Services Programs: Summary of State Laws • LAPPA</u>
(legislativeanalysis.org)





Questions and Answers





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