SYRINGE SERVICES PROGRAMS IN INDIANA

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Overview

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- What are Syringe Services Programs?
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What is Harm Reduction?

- Harm Reduction is a public health principle aimed at decreasing the harm associated with potentially dangerous human behaviors.

- The foundation of harm reduction is rooted in meeting a person “where they are” without judgment.

- Examples of harm reduction include:
  - Wearing a seatbelt while in a motor vehicle
  - Establishing a designated driver for a night out
  - Using a condom during penetrative sex
  - Syringe services programs
  - Naloxone distribution programs
What are Syringe Services Programs?

• Syringe Services Programs (SSPs), sometimes called syringe exchange, or needle exchange programs, are places where people who inject (PWI) receive new, clean, sterile syringes, safe disposal options, and referrals to other services the person may need.

• SSPs may provide the following:
  – Clean injecting supplies (newsprint, wound care items, clean water, tourniquets, and cookers)
  – Condoms, dental dams, and lubricant
  – On site or referrals for HIV, viral hepatitis, STD, and TB testing
  – Referrals to substance abuse treatment, mental health care, physical health care, housing, food, insurance, and other community resources
  – Wound Care
  – Hygiene items and clothing
  – Adult Immunizations
  – Referrals to Pre-Exposure Prophylaxis (PrEP)
History of Syringe Services Programs in Indiana

- 2009 - Ban lifted on the use of federal funds to support SSPs in the United States.
- 2010 - CDC, HHS, SAMSHA issued letter stating technical guidance was being developed.
- Early 2011 - ISDH formed committee to assess the feasibility of SSPs in the state.
- July 2011 - ISDH SSP Feasibility Committee determined that SSPs were not possible due to state laws at the time.
- December 2011 - Congress reinstated the ban on the use of federal funds.
- March 26, 2015 – Indiana Governor Mike Pence declares a public health emergency allowing for a short term, targeted SSP in Scott County in response to the HIV and HCV outbreak.
• April 4, 2015 – The first legal SSP in Indiana, located in Austin, in Scott County, opened its doors.

• Late April 2015 – The public health emergency in Scott County was renewed. The Indiana legislature passed, and Governor Pence signed into law, a bill allowing for SSPs to operate at the county or municipal level with approval from the State Health Commissioner.

• 2015 – 2016 – A total of 9 counties applied for and received approval from the State Health Commissioner to operate SSPs.

• April 26, 2017 – Governor Eric Holcomb signed into law an amendment allowing counties to either determine locally to operate a SSP or to seek approval through the State Health Commissioner.
Indiana’s Syringe Services Program Law

• The legislative body of municipality or the executive body of the county may either
  - Option 1: Submit a request to the State Health Commissioner to declare a public health emergency and approve operation of an SSP in the jurisdiction.
  - Option 2: Approve the operation of the program themselves for the jurisdiction. The State Health Commissioner must be notified of the use of this option.

• Sufficient quantities of an overdose intervention drug, like naloxone, must be in stock to administer and/or distribute.

• The jurisdiction must use the ISDH SSP database and provide data as requested by ISDH.

• The law will remain in effect until July 1, 2021.

• To access the entire law please visit: https://iga.in.gov/legislative/2017/bills/house/1438#document-290e673e
Current State of Syringe Services Programs in Indiana

- There are currently 8 SSPs operating in the state in Scott, Fayette, Madison, Monroe, Wayne, Clark, Allen, and Tippecanoe counties with additional counties considering them.

- Those programs serve nearly 3,750 Hoosiers representing 14,000 visits or opportunities to access all of the services provided by SSPs.

- The statewide return rate is 80% which is slightly higher than the national average.
Harm Reduction in Indiana

• Every community has the ability to offer harm reduction education and materials of some kind.
• Communities should consider, if they are not already providing them, harm reduction resources.
• These include but are not limited to;
  – Clean injecting supplies (newsprint, wound care items, clean water, tourniquets, and cookers)
  – Condoms, dental dams, and lubricant
  – Wound Care
  – Referrals to Pre-Exposure Prophylaxis (PrEP)
  – Safe sharps disposal
  – Safe injecting education and resources
The Future of Harm Reduction & Syringe Services Programs in Indiana

• The ISDH is moving towards a programmatic approach to SSPs statewide reflected in;
  – Technical guidance and ongoing support for counties offering and considering offering harm reduction and SSP services
  – Training opportunities specific to harm reduction and SSP service delivery
  – Opportunities for funding to support harm reduction and SSPs
  – Continued progress towards integrated HIV, STD, viral hepatitis prevention and care

• As SSPs grow in number and continue to become more established data related to them will continue to be provided.
Questions?

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Contact Information

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