



Syringe Service Programs in Maine Annual Report Federal Fiscal Year 2023

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Required by:
22 MRS chapter 252-A, §1341

Submitted by:
Infectious Disease Prevention Program
Maine Center for Disease Control and Prevention
Department of Health and Human Services

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Introduction

Maine Statute, 22 MRS chapter 252-A, § 1341, Hypodermic Apparatus Exchange Programs, requires the Maine Center for Disease Control and Prevention to file an annual report to the Legislature’s Judiciary Committee and Health and Human Services Committee on the status of syringe service programs certified under this section.

The reporting period for this report is November 1, 2022 through October 31, 2023.

A Brief Overview of Syringe Service Programs in Maine

During the reporting period, Maine had 13 certified Syringe Service Programs (SSP) operating in the communities of Portland, Augusta, Waterville, Bangor, Ellsworth, Sanford, Calais, Lewiston, Rumford, and Machias. These 13 locations are operated by eight organizations: City of Portland, MaineGeneral Medical Center, Maine Access Points, TriCounty Mental Health Services, Commonsplace (previously Amistad), Wabanaki Public Health and Wellness, Church of Safe Injection, and Health Equity Alliance. The location in Portland operated by the City of Portland is Maine’s first, opening in 1998. Currently, there are 32 certified sites in Maine, although not all are operational. All certified SSPs are required to submit their data on a monthly basis to the Maine Center for Disease Control and Prevention (Maine CDC), an office of the Department of Health and Human Services (DHHS).

In 2023, Maine’s SSPs:

- Collected **3,158,782** used syringes.
- Distributed **3,676,315** new syringes.
- Had **8,373** enrolled participants.
- Enrolled **1,841** new participants.
- Made **26,166** referrals for services, such as primary and medical care, STD clinics, HIV and hepatitis testing, substance use disorder treatment, peer support, recovery coaches, overdose aftercare, food assistance, wound care, naloxone distribution, housing, transportation, health insurance benefits, mental health services, and other social supports.
- Conducted **373** total HIV tests with syringe service program participants.
- Provided **2,574** individuals with naloxone and overdose prevention education.

Executive Summary

Rules, Policies, and Initiatives

Maine CDC is authorized by 22 MRS chapter 252-A, §1341(1) to certify hypodermic apparatus exchange programs, also referred to as Syringe Service Programs, to facilitate the prevention of blood-borne pathogens such as HIV (human immunodeficiency virus) and viral hepatitis. Pursuant to 22 MRSA §1341(3), this report reflects the syringe service activities conducted by the 13 certified program sites operating in Maine for the period from November 1, 2022, to October 31, 2023.

Public Law 1997 chapter 340 established the authority for the DHHS to certify Syringe Service Programs (SSP) that meet the requirements established by statute and specified in adopted program rules (10-144 CMR chapter 252). The statute was further amended when the 127th Maine State Legislature passed LD 1552, *An Act To Reduce Morbidity and Mortality Related to Injection Drugs* (Public Law 2015, chapter 507), directing the Maine CDC to allocate state funds to new and existing SSPs, but no funds were appropriated to support this mandate. Public Law 2017, chapter 464, *An Act To Reduce the Cost of Care Resulting from Blood-borne Infectious Diseases*, introduced as LD 1707, was enacted by the 128th Maine State Legislature, providing funds to support hypodermic apparatus exchange programs in the State.

In July 2021, the Legislature passed into law amendments that decriminalized the possession and furnishing of syringes with residual amounts of any scheduled drug and drug-testing equipment. It further removed language considering syringes as “drug paraphernalia” (17- A MRSA c. 434, §1106, §1107, §1110, and §1111(5)). Those changes went into effect on October 18, 2021.

In early Fall 2021, DHHS updated its *Syringe Services Programs Rule* (10-144 CMR chapter 252), formerly *Rules Governing the Implementation of Hypodermic Apparatus Exchange Programs*. In September 2022, rule amendments were implemented by emergency rulemaking and followed by the adoption of routine technical rule changes in November 2022 (5 MRS §8054). These rule amendments supported harm reduction practices by removing stigmatizing language and easing burdensome administrative directives. The current rule allows certified SSPs to exchange syringes via a 1:1+ strategy that better supports SSP program enrollees. Even if a client visits an SSP with no syringes to return, the person can receive up to 100 syringes at the site’s discretion and considering its inventory. This effectively removes barriers associated with a strict 1:1 exchange policy and moves Maine closer to a needs-based exchange. Needs-based exchange, which imposes no restrictions on the number of syringes a client can receive, is considered best practice by US CDC as it decreases injection risk behaviors and reduces transmission of blood-borne pathogens by increasing accessibility of sterile syringes.¹

In December 2019, the Governor’s Office of Policy Innovation and the Future released the *Opioid Response Strategic Plan* with the goal of “reducing the negative health and economic impacts of substance use disorder and opioid use disorder on individuals, families, and communities in

¹ *Centers for Disease Control and Prevention. Needs-Based Distribution at Syringe Service Programs Fact Sheet, <https://www.cdc.gov/ssp/docs/cdc-ssp-fact-sheet-508.pdf>*

Maine.”² Under Priority G, increased support to enhance and build capacity of new syringe service partners was set. In 2023, Maine’s Opioid Response 2023-2025 Strategic Action Plan took effect. This Strategic Action Plan includes “Harm Reduction” as one of the focus areas. Strategies within this focus area include “Strategy 20: Ensure the availability of harm reduction resources and referrals to treatment and recovery supports for individuals at high-risk of overdose” which incorporates the objective to “expand SSPs through the licensing of additional Certified Syringe Service Providers and the use of mobile distribution and outreach, in both urban and rural areas.”³ In addition to Maine’s updated Opioid Response Strategic Plan, Governor Mills announced \$1 million to purchase and distribute xylazine test strips.⁴

Funding Syringe Service Programs in Maine

Building upon success with funding from previous years, in January 2022, the Department was appropriated \$1,000,000 through the Opioid Use Disorder Prevention and Treatment Fund, established by PL 2019, c. 536, to continue supporting SSPs through June 30, 2023. In 2023, \$960,000 per year for two years was added for a total of \$1,920,000 to support SSPs through 2025, combined with the \$75,000 provided annually for existing SSPs (PL 2017, c. 464).

Aside from the General Funds used to support SSP activities, Maine CDC braided funding from federal grants that support SSP activities to establish two-year contracts with SSPs from July 1, 2023, to June 30, 2025. The ban on using federal funds to support SSP activities was lifted on January 6, 2016.⁵ These contracts allow for increased funding in areas with high acute hepatitis C disease burden and continued support for existing organizations. It is important to note that funding for SSPs in Maine continues to be an ongoing challenge in ensuring financial sustainability and growth for SSPs. There is a need for SSPs in Maine, and while more SSPs are becoming certified and existing SSPs are operating new sites, funding for SSPs has not increased to match the needs of new and existing SSPs.

Eight State-certified SSPs operated 13 sites in Maine during this reporting period:

- The City of Portland operates one site in Portland.
- Commonsplace (Previously Amistad) operates one site in Portland.
- Down East AIDS Network/Health Equity Alliance operates sites in Bangor and Ellsworth.
- MaineGeneral Medical Center Next Step Needle Exchange operates sites in Augusta and Waterville.
- Maine Access Points operates sites in Sanford, Rumford, Machias, and Calais.
- Tri-County Mental Health Services operates a site in Lewiston.
- Wabanaki Public Health and Wellness operates a site in Bangor.
- Church of Safe Injection operates a site in Lewiston.

² Maine Opioid Response Strategic Action Plan, 2019.
https://www.maine.gov/future/sites/maine.gov.future/files/inline-files/MaineOpioidResponse.StrategicActionPlan.FINAL_12.11.19.pdf

³ Maine Opioid Response 2023-2025 Strategic Action Plan, 2023.
https://www.maine.gov/future/sites/maine.gov.future/files/inline-files/GOPIF_OpioidReport_2023.pdf

⁴ *State of Maine Office of Governor*. Governor Mills Announces Action to Address Growing Threat of Xylazine. July 2023.
<https://www.maine.gov/governor/mills/news/governor-mills-announces-action-address-growing-threat-xylazine-2023-10-25>

⁵ *Harm Reduction Coalition*. National Minority Aids Council Briefing, Federal Funding for Syringe Exchange,
<https://harmreduction.org/wp-content/uploads/2012/01/Syringe-Exchange-June-4-NMAC.pdf>

For agency-specific information and data, please see Appendices A through M.

Impact of Syringe Service Programs in Maine

SSPs offer sterile syringes, which is crucial to reducing the risk of blood-borne infections, such as hepatitis B, hepatitis C, and HIV, as well as prevent outbreaks.⁶ SSPs also offer a variety of harm reduction services that strengthen communities and support people who use drugs to promote their health and well-being. SSPs offer services such as: blood-borne pathogen testing, medication-assisted treatment (MAT) for opioid use disorder, linkage to care, case management, naloxone distribution, drug testing, peer support, social services, overdose prevention education, and referral for hepatitis B, hepatitis C, and HIV.

Due to the wide range of services provided, SSPs have been shown to reduce new hepatitis C and HIV cases by an estimated 50%.⁷ New enrollees in SSPs are five times more likely to participate in a substance use recovery program and three times more likely to stop injecting drugs than people who use drugs who are not enrolled in an SSP.⁸ SSPs help to prevent overdose deaths by providing naloxone to community members and program enrollees and teaching enrollees how to recognize an overdose and administer that naloxone.^{9,10,11,12,13,14} SSPs reduce the number of discarded used syringes in communities.¹⁵

Maine has seen a sharp increase in cases of hepatitis A, hepatitis B, and hepatitis C in recent years, attributed to the ongoing opioid crisis. From 2015 to 2020, the rate of hepatitis A increased tenfold,

⁶ Centers for Disease Control and Prevention. Syringe Service Programs Fact Sheet, <https://www.cdc.gov/ssp/syringe-services-programs-factsheet.html>

⁷ Platt L, Minozzi S, Reed J, et al. Needle syringe programmes and opioid substitution therapy for preventing hepatitis C transmission in people who inject drugs. *Cochrane Database Syst Rev.* 2017;9:CD012021. doi:10.1002/14651858.CD012021.pub2.

⁸ Des Jarlais DC, Nugent A, Solberg A, Feelemyer J, Mermin J, Holtzman D. Syringe service programs for persons who inject drugs in urban, suburban, and rural areas — United States, 2013. *MMWR Morb Mortal Wkly Rep.* 2015;64(48):1337-1341. doi:10.15585/mmwr.mm6448a3.

⁹ Seal KH, Thawley R, Gee L. Naloxone distribution and cardiopulmonary resuscitation training for injection drug users to prevent heroin overdose death: A pilot intervention study. *J Urban Health.* 2005;82(2):303–311. doi:10.1093/urban/jti053.

¹⁰ Galea S, Worthington N, Piper TM, Nandi VV, Curtis M, Rosenthal DM. Provision of naloxone to injection drug users as an overdose prevention strategy: Early evidence from a pilot study in New York City. *Addict Behav.* 2006;31(5):907-912. doi:10.1016/j.addbeh.2005.07.020.

¹¹ Tobin KE, Sherman SG, Beilenson P, Welsh C, Latkin CA. Evaluation of the Staying Alive programme: Training injection drug users to properly administer naloxone and save lives. *Int J Drug Policy.* 2009;20(2):131-136. doi:10.1016/j.drugpo.2008.03.002.

¹² Doe-Simkins M, Walley AY, Epstein A, Moyer P. Saved by the nose: Bystander-administered intranasal naloxone hydrochloride for opioid overdose. *Am J Public Health.* 2009;99(5):788-791. doi:10.2105/ajph.2008.146647.

¹³ Bennett AS, Bell A, Tomedi L, Hulsey EG, Kral AH. Characteristics of an overdose prevention, response, and naloxone distribution program in Pittsburgh and Allegheny County, Pennsylvania. *J Urban Health.* 2011;88(6):1020-1030. doi:10.1007/s11524-011-9600-7.

¹⁴ Leece PN, Hopkins S, Marshall C, Orkin A, Gassanov MA, Shahin RM. Development and implementation of an opioid overdose prevention and response program in Toronto, Ontario. *Can J Public Health.* 2013;104(3):e200-204.

¹⁵ Tookes HE, Kral AH, Wenger LD, 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 Alcohol Depend.* 2012;123(1-3):255-259. doi:10.1016/j.drugalcdep.2011.12.001.

acute hepatitis B rates nearly tripled, and acute hepatitis C rates increased by seven times. The marked increase in cases of acute viral hepatitis represents the rising burden of disease from viral hepatitis. In Maine in 2022, 54% of acute hepatitis A cases indicated injection or non-injection drug use, while 58% of acute hepatitis B cases and 59% of acute hepatitis C cases reported injection drug use.^{16,17,18}

The COVID-19 pandemic greatly impacted disease burden among certain groups at increased risk of acquiring hepatitis A, such as people who use both injection and non-injection drugs, people who are unhoused or experiencing unstable housing, and people who are currently or recently incarcerated. Accessing hygienic supplies, housing, and vaccines has been difficult for these groups during the pandemic and continues to be difficult. Throughout 2023, Maine had various encampments of people experiencing homelessness; a total of 4,258 people experiencing homelessness, as determined through the Maine Point in Time Count of 2023.¹⁹ While Maine has a majority white population, racial minorities were more likely to experience homelessness, with racial minorities comprising 52% of the 2023 Point in Time Count.

Additionally, 299 of the adults surveyed experiencing homelessness also had a substance use disorder.²⁰ SSPs worked to provide essential services such as basic needs items, health care resources, linkage to care, and more. However, providing for this population became difficult as encampments were shut down. Transience made it difficult to effectively provide linkage to care and resources, since many people living in encampments do not have reliable access to phones or the internet or an address where SSP staff can reliably reach them and provide follow up services.

Since 2019, Maine continues to be part of a widespread person-to-person outbreak of hepatitis A across the United States. Maine experienced a surge in hepatitis A cases in the third quarter of 2023, with eight cases reported in the first two quarters, followed by 32 cases in quarter 3²¹, and an annual total of 54 cases as of data through November 2023.²² Hepatitis A outbreaks among people who are unhoused were a concern given the rising number of hepatitis A cases in 2023. SSPs successfully worked to facilitate various hepatitis A vaccination events at their sites, specifically in areas experiencing higher rates of infection, throughout 2023 to help reduce this surge in hepatitis A cases.

According to the Centers for Disease Control and Prevention Viral Hepatitis Surveillance Report, Maine has had the highest rate of acute hepatitis C in the country since 2020. In 2022, Maine

¹⁶ *Maine Center for Disease Control and Prevention. Maine Surveillance Report – Hepatitis A. 2022*

[file:///C:/Users/carolina.rojas-becer/Downloads/2022%20HepA%20Acute%20Surveillance%20Report%20\(1\).pdf](file:///C:/Users/carolina.rojas-becer/Downloads/2022%20HepA%20Acute%20Surveillance%20Report%20(1).pdf)

¹⁷ *Maine Center for Disease Control and Prevention. Maine Surveillance Report – Hepatitis B. 2022*

file:///C:/Users/carolina.rojas-becer/Downloads/2022%20Hepatitis%20B%20Surveillance%20Report_FINAL.pdf

¹⁸ *Maine Center for Disease Control and Prevention. Maine Surveillance Report – Hepatitis A. 2022*

file:///C:/Users/carolina.rojas-becer/Downloads/2022%20Hepatitis%20C%20Surveillance%20Report_FINAL.pdf

¹⁹ *Maine State Housing Authority. 2023 Point in Time Count.*

https://www.mainehousing.org/docs/default-source/housing-reports/2023-point-in-time.pdf?sfvrsn=e1c28015_5

²⁰ *Maine State Housing Authority. 2023 Point in Time Count.*

https://www.mainehousing.org/docs/default-source/housing-reports/2023-point-in-time.pdf?sfvrsn=e1c28015_5

²¹ *Maine Center for Disease Control and Prevention. Maine CDC Infectious Disease Program – Quarterly Case Counts. 2023*

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²² *Maine Center for Disease Control and Prevention. Selected Reportable Diseases in Maine, Year to Date and Five Year Median Through November 2023.*

<file:///C:/Users/carolina.rojas-becer/Downloads/11-Nov2023.pdf>

remained the state with the highest rate of acute hepatitis C with 6.8 cases per 100,000 population, which is a decrease from 2021 when Maine had 9.8 cases per 100,000 population. In 2022, per Centers for Disease Control and Prevention, Maine and Mississippi both had the highest rate of hepatitis A in the country with 4.6 cases per 100,000 population, and third highest rate of acute hepatitis B in the country reporting 2.1 cases per 100,000 population. At the same time, Maine reported the 3rd highest rate of opioid overdose deaths in the United States.²³ Public health officials identified a link between the opioid epidemic and the spread of blood-borne infections such as HIV, hepatitis B, and hepatitis C.²⁴ In Maine, as nationwide²⁵, the highest risk factor for acquiring hepatitis B and hepatitis C is injection drug use. Viral hepatitis can be spread by sharing syringes, needles, and injection equipment, such as water, tourniquets, cotton, drug cookers, contaminated surfaces, or the drugs themselves. The number of fatal overdoses in Maine rose 4.5% from 2020 to 2021. In 2023, 78% of drug death cases were attributed to nonpharmaceutical fentanyl.²⁶ The number of drug deaths continues to remain high in 2023, however, Maine experienced a slight decrease in fatal overdose deaths from 2022 (total of 723 fatal overdoses) to 2023 (total of 607 fatal overdoses).²⁷

Viral hepatitis is a leading cause of liver cancer and the most common reason for liver transplantation among adults in the United States.²² People chronically infected with hepatitis B are 100 times more likely to develop liver cancer than uninfected people.²³ People with hepatitis C are more than twice as likely to die from heart disease than people without hepatitis C.²⁴

2023 Syringe Service Program Data

All certified SSPs are required to submit their data annually to the Maine CDC. In 2023, 8,373 individuals were enrolled in SSPs. This is about a 25% increase from 2022. The certified SSPs collected a total of 3,158,782 used syringes from the 8,373 enrolled individuals, which is an average of 377 syringes exchanged per person. The 3,158,782 used syringes were collected during 31,113 exchange events. An *exchange event* is when an individual visits a SSP to exchange one or more used syringes and/or to receive support services. This is an average of 102 syringes exchanged per visit. The 8,373 enrolled individuals visited certified SSPs 31,113 times in 2023, which is an average of four visits per person. This is slight increase when compared to 2022, when the average number of visits per person was three visits.

In 2023, the number of new enrollees increased by about 10% since 2022. There were 1,129 referrals for HIV testing, 943 referrals for STD testing, and 1,141 referrals for Hepatitis C testing offered. SSP staff made a total of 638 referrals to primary care providers, 632 to substance use treatment programs, and 738 to housing assistance programs. There were 3,471 referrals to peer support or recovery coaches, which was the greatest number of referrals for any category in 2023. SSPs made 1,386 referrals for case management and patient navigators. There were 875 referrals

²³ Centers for Disease Control and Prevention. SUDORS Dashboard: Fatal Overdose Data. Updated February 26, 2024.

<https://www.cdc.gov/drugoverdose/fatal/dashboard/index.html>.

²⁴ Centers for Disease Control and Prevention. Viral Hepatitis Surveillance – United States, 2018.

<https://www.cdc.gov/hepatitis/statistics/SurveillanceRpts.htm>

²⁵ Centers for Disease Control and Prevention. Syringe Services Programs Fact Sheet, <https://www.cdc.gov/ssp/syringe-services-programs-factsheet.html>

²⁶ Maine Drug Data Hub, <https://mainedrugdata.org/>

²⁷ Ibid.

made to food assistance programs and food pantries. Additionally, there were 3,287 referrals to overdose aftercare for those clients who experienced a nonfatal drug overdose. There were 1,184 referrals to the DHHS Office of Family Independence, General Assistance, and basic needs programs. There were 2,522 referrals to wound care and safer injection practices. SSPs were also able to make referrals for clients to COVID- 19 testing, vaccine, and support programs. Many SSPs serve as either Tier 1 or Tier 2 naloxone distribution sites, serving as the driving forces of naloxone distribution in Maine. There were 2,574 referrals to the overdose prevention education and naloxone distribution program through the syringe service programs directly. SSPs also made 2,908 referrals for drug test kits and education surrounding drug use.

The top 10 most referred services for 2023 were (in order from most referrals to least): peer support, overdose aftercare, drug test kits and education, naloxone distribution and overdose prevention education, wound care and safer injection education, case management and patient navigator, community health education, basic needs and General Assistance, hepatitis testing, and HIV testing.

Much of the data submitted in 2022 is greatly affected by the pandemic and reversion to pre-pandemic SSP rules to allow for more comprehensive harm reduction services. To comply with pandemic protocols, much of the data on syringe collection and disposal are underreported. Despite operational challenges due to the pandemic, many agencies were able to work collaboratively with their local jurisdictions to provide biohazard sharps disposal boxes in key hotspots in their respective municipalities, including Portland, Lewiston, Westbrook, and Bangor. Many SSPs provided educational brochures and communication from Maine's Department of Environmental Protection on safe disposal of household medical sharps.

SSPs frequently coordinate to host community outreach and syringe waste pickup events. SSPs are an essential resource for many clients, particularly those who are unstably housed, because they provide hygiene kits, food, masks, hand sanitizer, and warm clothing to clients directly. As Maine experienced an increase in hepatitis A cases during the second half of 2023, SSPs facilitated hepatitis A vaccination events at their sites to increase vaccination rates specifically for people with risk factors. SSPs also provided education on viral hepatitis, especially on hepatitis A, during this period. SSPs provide an effective means to reach high risk populations and decrease transmission of blood-borne infections through their everyday activities.

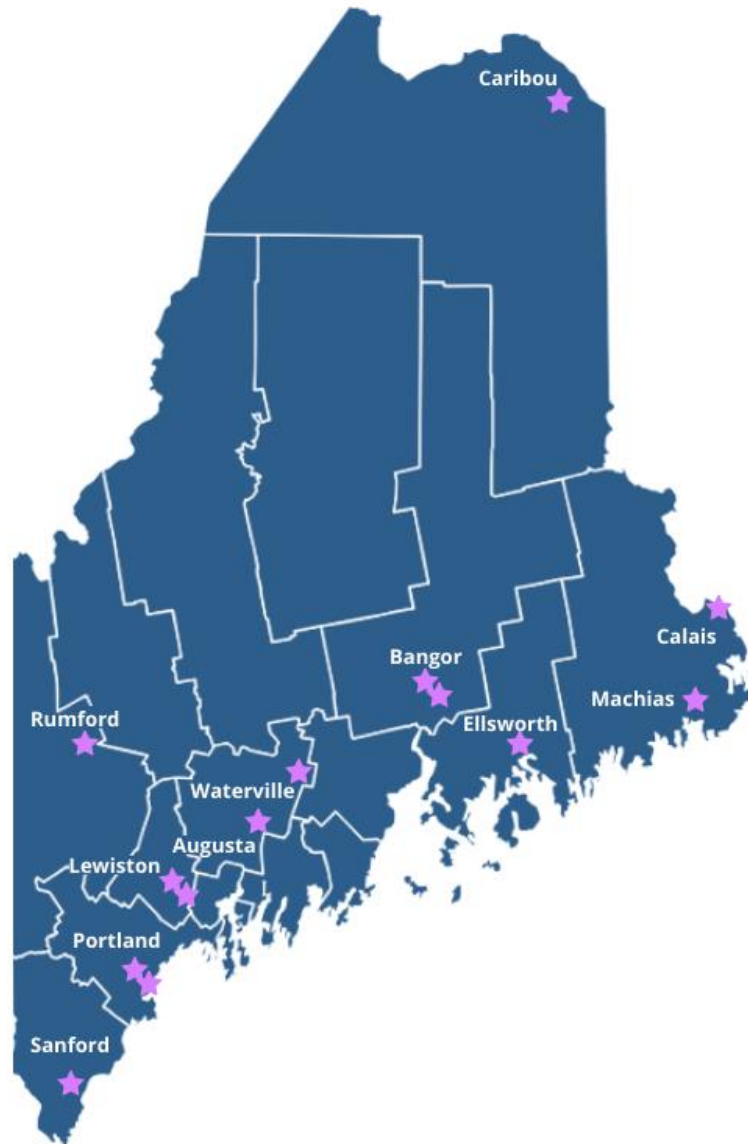
Additionally, SSP representatives served on the Maine HIV/AIDS Advisory Board (MeHAAB), which drafted a five-year strategic plan to reduce new HIV infections and increase support services for those living with HIV in Maine.²⁵ SSPs continue to serve as a vital connection to public health programs of all kinds given the vulnerable populations they support.

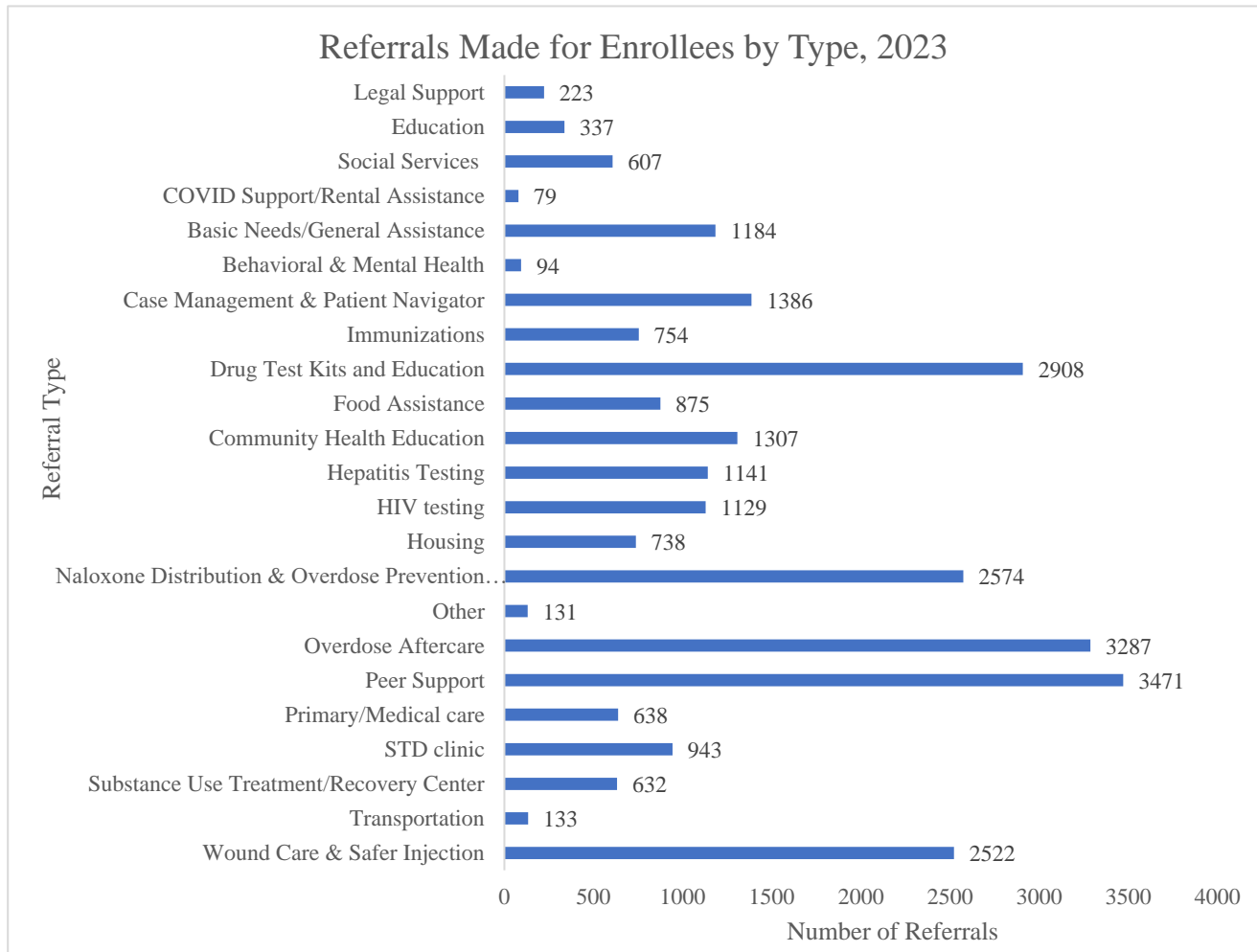
Syringe Service Programs Report for 2023; Reporting Period 11/1/2022 – 10/31/2023

Eight State-certified SSPs operated 13 sites in Maine during this reporting period.

Agency	Site Location	Certification Date
Commonspace (formerly Amistad)	Portland	November 2020
Church of Safe Injection	Lewiston	September 2021
City of Portland	Portland	September 1998
Health Equity Alliance	Ellsworth	July 2014
Health Equity Alliance	Bangor	July 2014
Next Step Needle Exchange	Augusta	December 2004
Next Step Needle Exchange	Waterville	February 2018
Maine Access Points	Sanford	February 2020
Maine Access Points	Calais	February 2020
Maine Access Points	Rumford	June 2022
Maine Access Points	Machias	March 2021
TriCounty Mental Health Services	Lewiston	March 2020
Wabanaki Public Health and Wellness	Bangor	February 2021

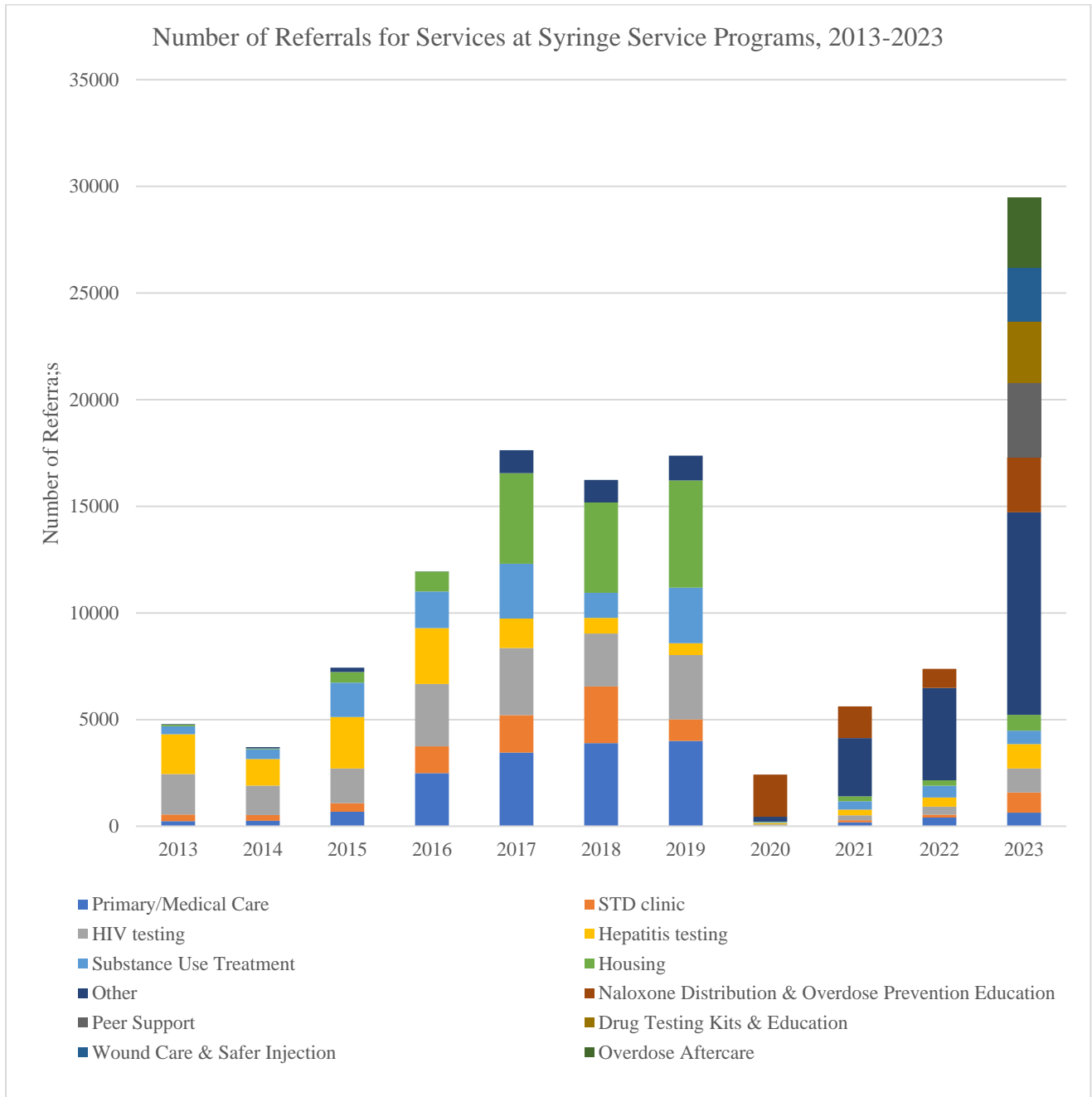
Map 1.1 - Location of Operating Syringe Service Program sites in Maine.



Graph 1.1 Referrals made for enrollees by type, 2023

From 11/01/2022 to 10/31/2023, SSP enrollees received 638 referrals for primary and medical care; 943 referrals for STD clinic services; 1,129 referrals for HIV testing; 1,141 referrals for hepatitis testing; 632 referrals for substance use disorder treatment and recovery centers; 738 referrals for housing; 3,471 referrals for peer support; 3,287 for overdose aftercare; 875 for food assistance; 1,386 for case management and patient navigation services; 94 for behavioral and mental health; 1,184 for basic needs and General Assistance; 2,908 for drug testing kits and education; 79 for COVID-19 testing and support; 133 for transportation assistance; 607 for other social services; 223 for legal support; and 2,522 for wound care and safer injection practices. Other referrals include financial education and assistance, intimate partner violence, community organizing, and daycare/child supports among others. As demonstrated in Graph 1.1, SSP participants have a variety of needs beyond accessing syringes and often seek SSPs to assist with meeting these needs.

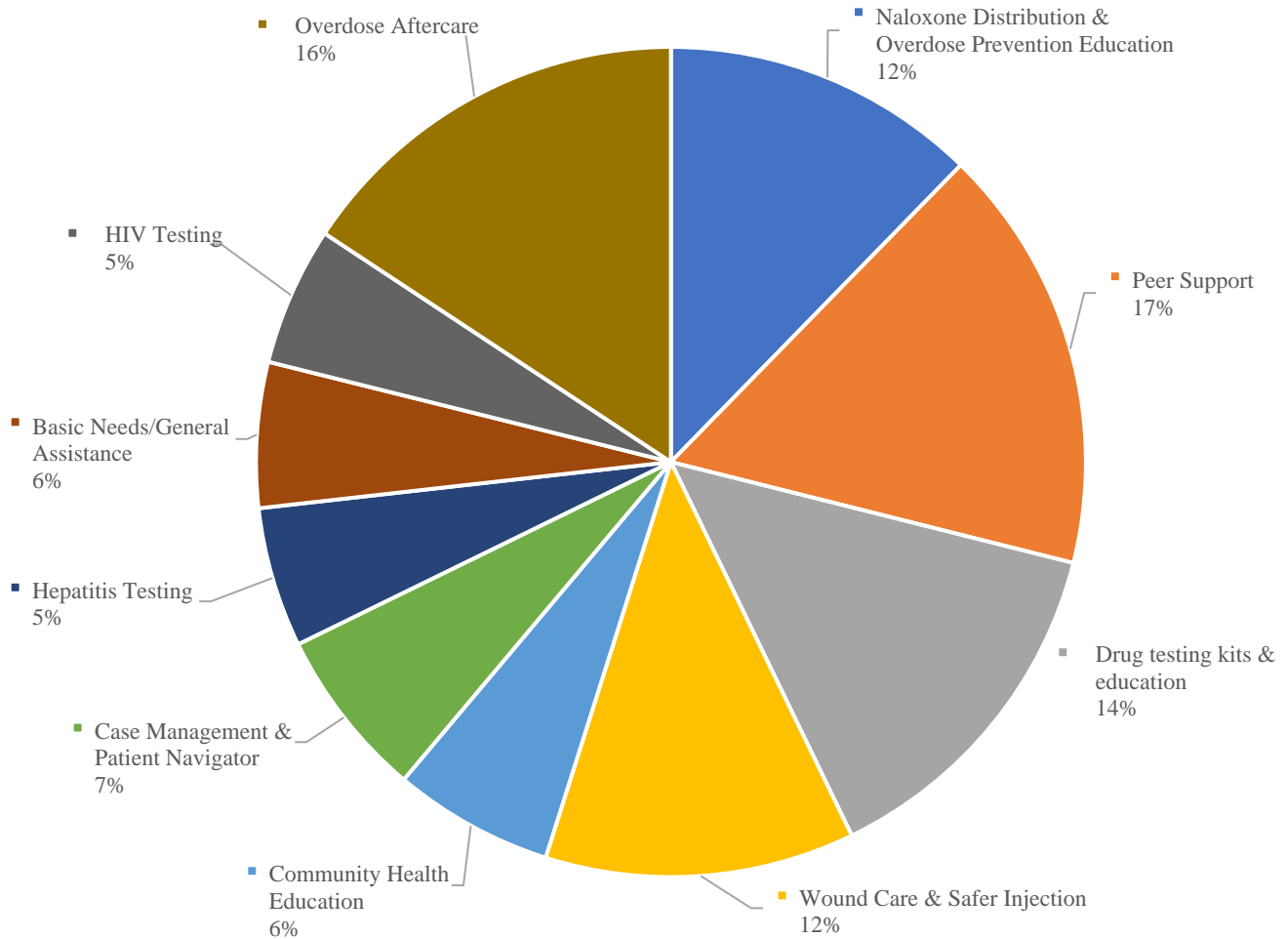
Graph 2.1 Referrals made for services at syringe service programs, 2013-2023



Graph 2.1 demonstrates how priorities and needs of program enrollees have shifted since 2013. After COVID-19 in 2020, referrals significantly decreased. However, 2023 shows an increase in the number of referrals compared to pre-pandemic levels. The number of referrals in 2023 is more than three times higher than the number of referrals in 2022, demonstrating the need for more resources among program enrollees.

Graph 2.2 Top 10 Referrals Made for Enrollees by Type, 2023

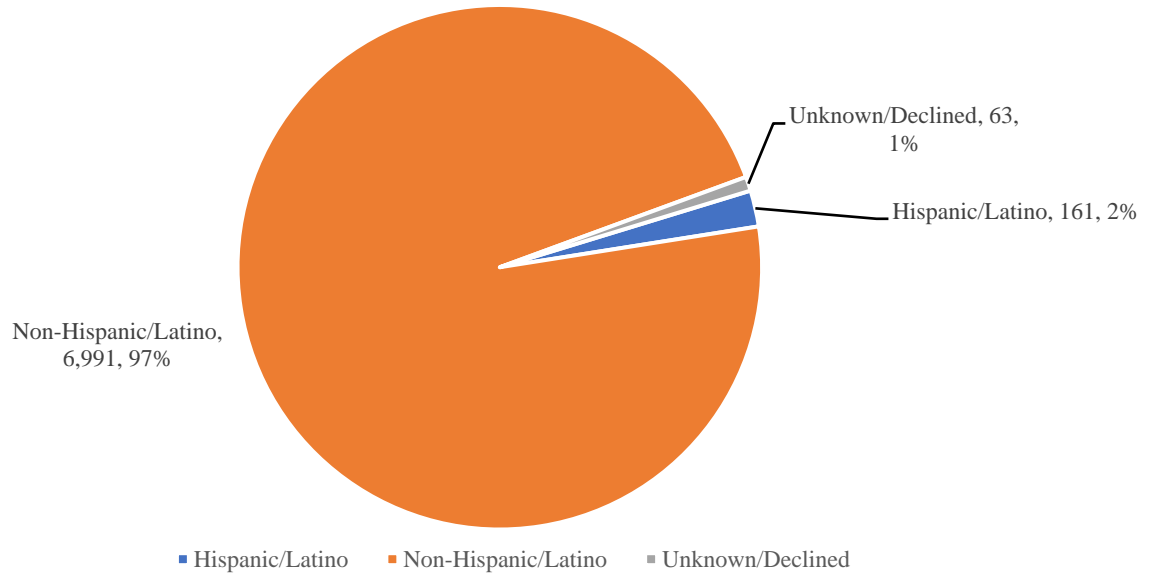
Top 10 Referrals Made for Enrollees by Type, 2023



From 11/01/2022 to 10/31/2023, these were the top ten referrals made for enrollees by type and in order starting with the highest percentage of referrals: peer support (17%), overdose aftercare (16%), drug testing kits and education (14%), naloxone distribution and overdose prevention education (12%), wound care and safer injection (12%), case management and patient navigation (7%), basic needs/General Assistance (6%), community health education (6%), HIV testing (6%), and viral hepatitis testing (6%). Graph 2.2 highlights the top needs of SSP participants being access to safer substance use management, social support, basic needs, and health services.

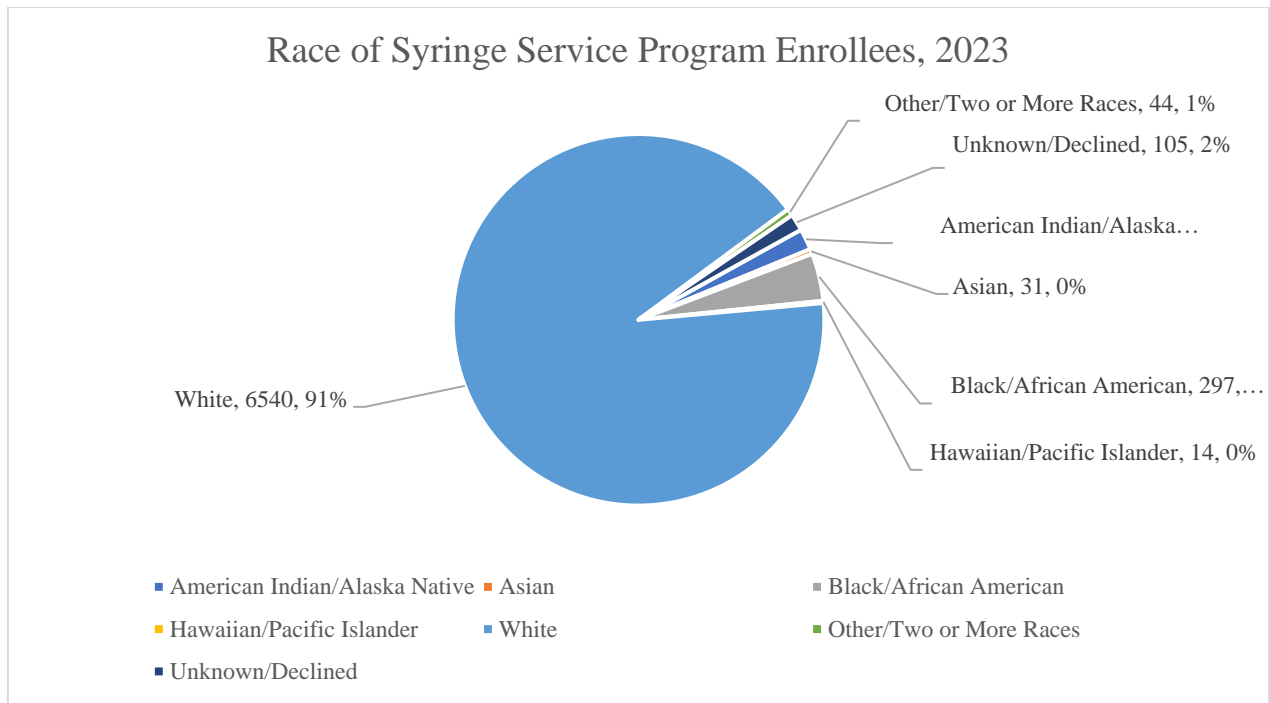
Graph 3.1 - 2023 Enrollee Demographics by Ethnicity

Ethnicity of Syringe Service Program Enrollees, 2023

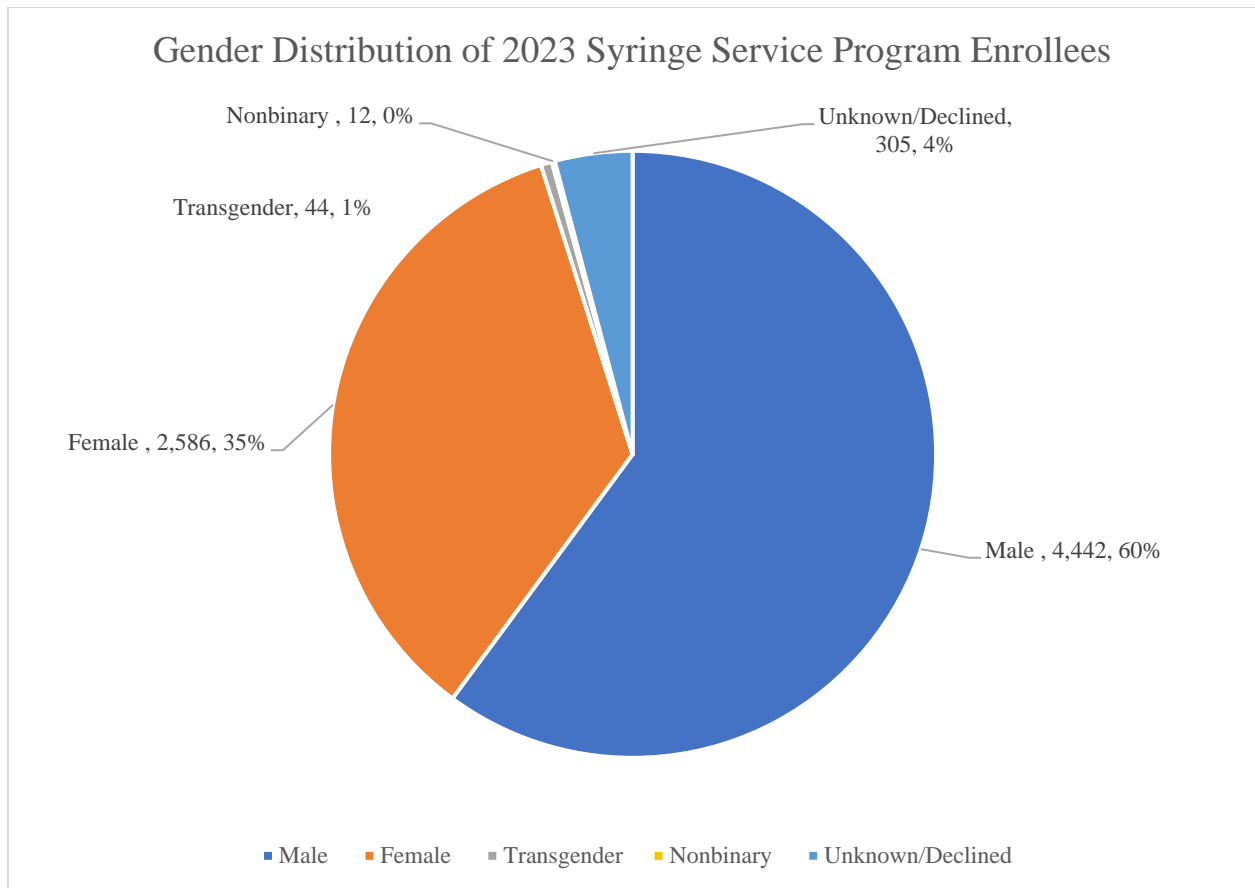


From 11/01/2022 to 10/31/2023, the majority of program enrollees identified as Non-Hispanic/Latino, and only 2% of program enrollees identified as Hispanic/Latino. Note: enrollees can decline to provide demographic information.

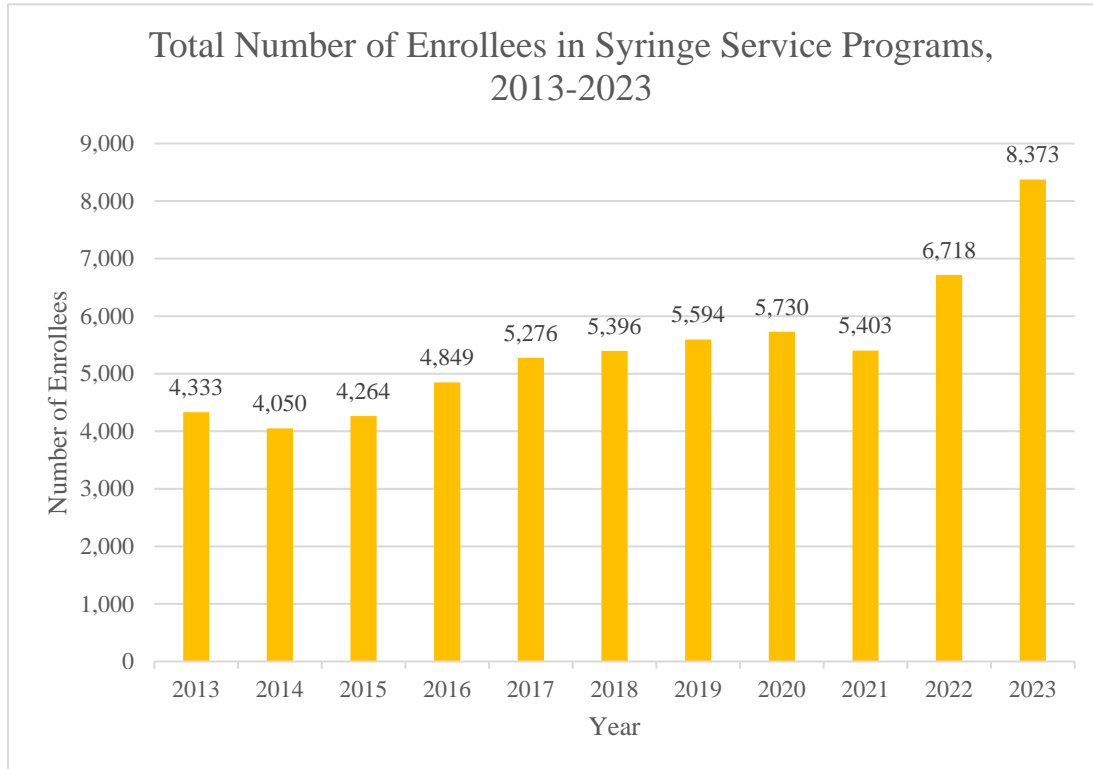
Graph 3.2 – 2023 Enrollee Demographics by Race



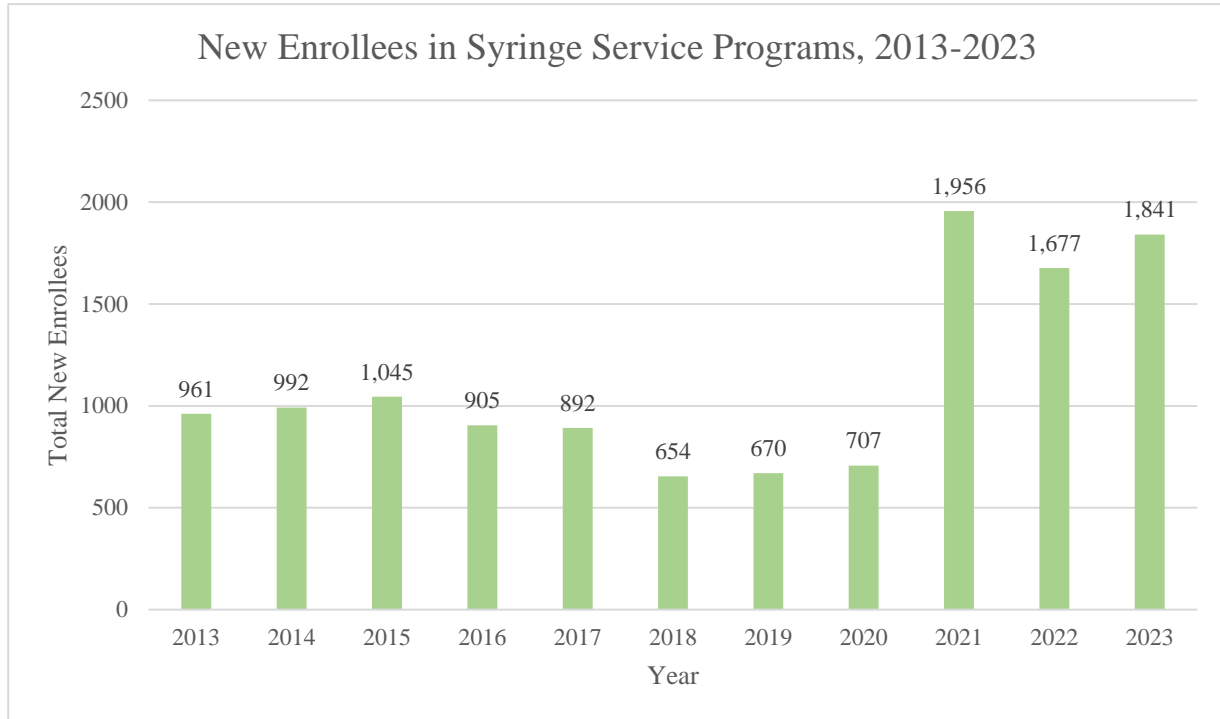
From 11/01/2022 to 10/31/2023, the majority of program enrollees identified as White (91%), which is in line with Maine’s overall state population. However, 297 (4%) of program enrollees identified as Black/African American and 132 (2%) of program enrollees identified as American Indian/Alaska Native, compared to 2% and less than 1% of the overall state population, respectively. Note: enrollees can decline to provide demographics

Graph 4.1 - Gender Distribution of 2023 Syringe Service Programs Enrollees

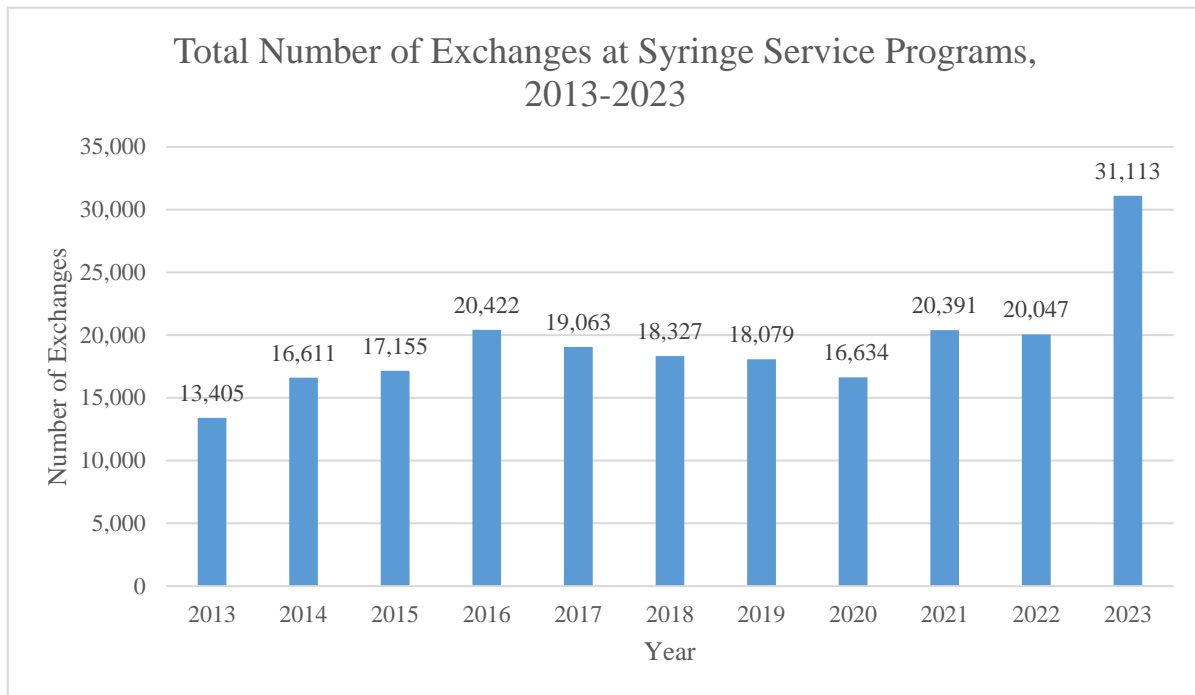
From 11/01/2022 to 10/31/2023, 60% of SSP enrollees were male, 35% of enrollees were female, and 1% were transgender. Additionally, 78% of individuals were 30 years old or older. Note: enrollees can decline to provide demographic information.

Graph 5.1 - Total Number of Enrollees in Syringe Service Programs, 2013-2023

Graph 5.1 highlights the total number of enrollees in SSPs since 2013. From 2021 to 2022, SSPs experienced a 24% increase in the number of enrollees. The number of enrollees has almost doubled in the last decade, demonstrating increased and continued need for SSPs in Maine.

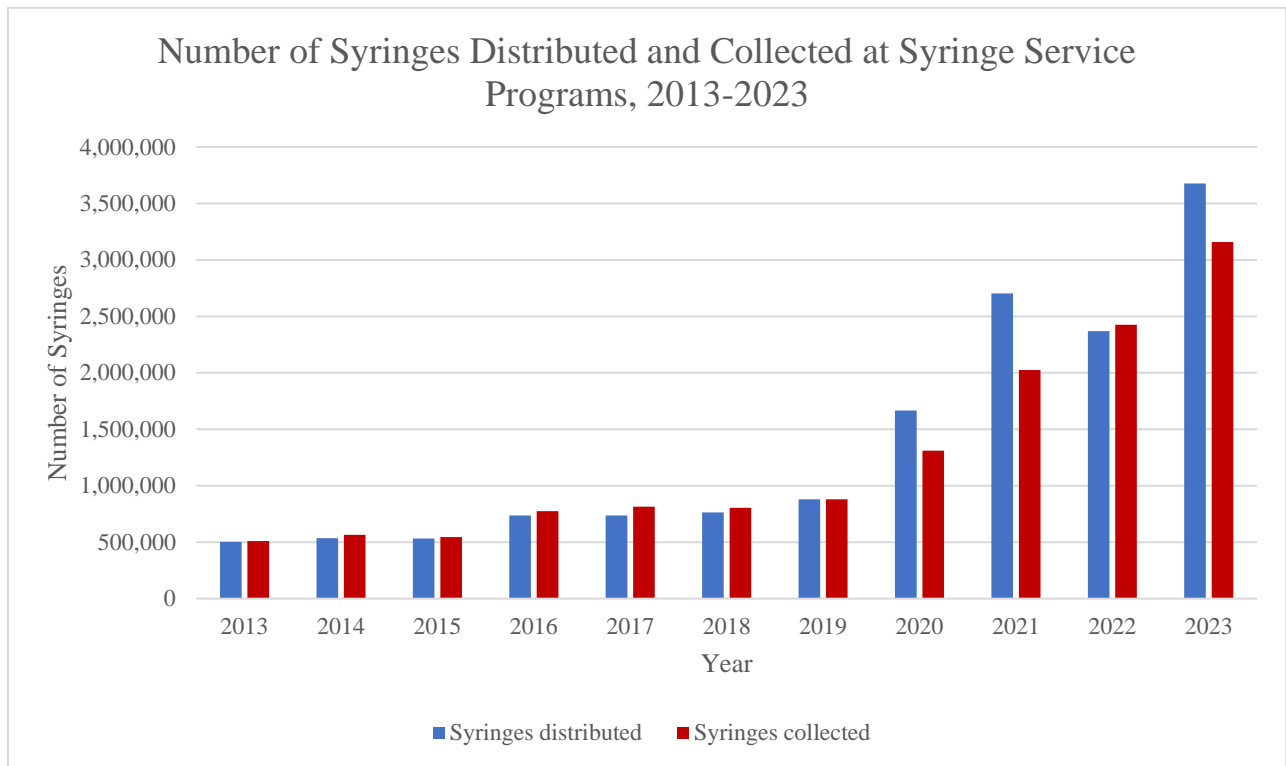
Graph 6.1 - New Enrollees in Syringe Service Programs, 2013-2023

Graph 6.1 shows the total *new* enrollees in SSPs since 2013. Since 2018, there has been an increase in new enrollees with a rapid increase from 2020 to 2021, where the number of new enrollees was almost 2.8 times higher in 2021 than in 2020. While there has been a slight decrease in new enrollees since 2021, SSPs did experience an almost 10% increase in new enrollees from 2022 to 2023.

Graph 7.1 - Total Number of Exchanges at Syringe Service Programs in 2013-2023

Graph 7.1 shows the number of exchanges (face-to-face or by mail interactions, not the number of syringes) completed at SSPs since 2013. While exchange events decreased from 2017 to 2020, there was an increase of 55% from 2022 to 2023. This represents the highest number of exchange events since data has been collected.

Graph 8.1 - Total Number of Syringes Distributed and Collected at Syringe Service Programs, 2013-2023.



Graph 8.1 highlights the increase in both the number of syringes distributed and collected since 2013. In 2023, there were 3,158,782 syringes collected and 3,676,315 syringes distributed.

Appendix A: Commonsense-Portland 11/01/22-10/31/23

Operator: Commonsense

Location of Site: 103 India Street, Portland, ME 04101

Established Date: March 16, 2021

Indicator	Quantity
Total enrolled	1,228
New enrollees, total	301
Number of HIV Tests conducted with new enrollees	8
Total number of HIV Tests conducted with exchange consumers	8
Number of syringes collected, total	516,950
Number of syringes disposed, total	516,950
Number of syringes distributed without exchange at enrollment	N/A
Syringes distributed, total	562,474
Number of initial exchange kits distributed	N/A
Total exchanges	9,968
Number of off-site exchanges	6,949
Total referrals made	3,898
Total number of clients who receive a “starter kit”	N/A

Number of Referrals Made	Quantity
Primary Care	22
STD clinic referrals	339
HIV testing referrals	339
Hepatitis Testing	339
Substance Use Treatment/MOUD referrals	28
Housing	65
Peer Support	768
Overdose Aftercare	185
Food Assistance	132
Case Management	N/A
Wound care Clinic/Referral	327
Community Health Education	39
Health Education Session	1,268
Safer Injection Education	47
Total Referrals Made	3,898

Enrollee Demographics	Count
Gender	
Females	841
Males	1,795
Transgender	28
Non-binary	8
Not Provided	11
Race	
American Indian/Alaska Native	17
Asian	17
Black/African American	221
White	2,167
Hawaiian/Pacific Islander	14
Mixed Race	40
Other/Did not Answer	21
Hispanic/Latino/LatinX	76
Total	2,573
Age	
18-29	127
30+	757
35-44	599
45-54	283
54-64	24
65 or older	N/A

Appendix B: City of Portland Public Health-Portland 11/01/22-10/31/23

Operator: Portland Public Health

On site exchanges: 39 Forest Ave, Portland, ME

Outreach: Corner of Oxford and Elm Streets,
Portland, ME Established Date: 1998

Indicator	Quantity
Total enrolled	2,329
New enrollees, total	77
Number of HIV Tests conducted with new enrollees	N/A
Total number of HIV Tests conducted with exchange consumers	200
Number of syringes collected, total	537,297
Number of syringes disposed, total	537,297
Number of syringes distributed without exchange at enrollment	256,344
Syringes distributed, total	785,960
Number of initial exchange kits distributed	N/A
Total exchanges	6,255
Number of off-site exchanges	2,498
Total referrals made	2,557
Total number of clients who receive a “starter kit”	N/A

Number of Referrals Made	Quantity
Social Services	28
STD clinic	213
HIV/ HCV Testing	774
Medication for Opioid Use Disorder	5
Housing	41
Peer Support	15
General Medical	72
Food Assistance	60
OPTIONS	1
Other: Recovery supports	15
Other: Methadone	7
Other: Detox	8
Other: Patient Navigator	151
Other: Reproductive health	1
Other: General Assistance	28
Other: Immunizations	608
Other: Harm Reduction, other	1
Other: Clothing, basic needs	527
Other: Dental	1
Other: Library	1
Total Referrals Made	2557

Enrollee Demographics										
Clients Served	Male 18-29	Male 30+	Female 18-29	Female 30+	Trans M-F 18-29	Trans M-F 30+	Trans F-M 18-29	Trans F-M 30+	Non-Binary 18-29	Non-Binary 30+
Hispanic/Latino	2	6	0	2	0	0	0	0	0	0
Non-Hispanic/Latino	42	459	32	202	1	1	4	0	2	2
Unknown	0	0	0	0	0	0	0	0	0	0
TOTAL	44	465	32	204	1	1	4	0	2	2

Enrollee Demographics										
Clients Served	Male 18-29	Male 30+	Female 18-29	Female 30+	Trans M-F 18-29	Trans M-F 30+	Trans F-M 18-29	Trans F-M 30+	Non-Binary 18-29	Non-Binary 30+
American Indian/ Alaska Native	0	0	0	0	0	0	0	0	0	0
Asian	0	3	0	0	0	0	0	0	0	0
Black/African American	3	9	1	3	0	0	0	0	0	0
Hawaiian/Pacific Islander	0	0	0	0	0	0	0	0	0	0
White	39	439	31	198	1	1	4	0	2	2
Other races	0	8	0	1	0	0	0	0	0	0
Unknown	0	6	0	2	0	0	0	0	0	0
TOTAL	44	465	32	204	1	1	4	0	2	2

Appendix C: Tri-County Lewiston 11/01/22-10/31/23

Operator: Tri-County Mental Health

Services Location: Lewiston

Established Date: May 2020

Indicator	Quantity
Total enrolled	158
New enrollees, total	121
Number of HIV Tests conducted with new enrollees	N/A
Total number of HIV Tests conducted with exchange consumers	N/A
Number of syringes collected, total	41,700
Number of syringes disposed, total	41,700
Number of syringes distributed without exchange at enrollment	500
Syringes distributed, total	41,700
Number of initial exchange kits distributed	102
Total exchanges	102
Number of off-site exchanges	6
Total referrals made	11,776
Total number of clients who receive a “starter kit”	N/A

Number of Referrals Made	Quantity
Primary Care	9
STD clinic	23
HIV testing	23
Hepatitis Testing	23
Substance Abuse Treatment	22
Housing	18
Peer Support	26
Overdose Aftercare	8
Food Assistance	14
Case Management	18
Other:	11,592
Total Referrals Made	11,776

Enrollee Demographics								
Clients Served	Male 18-29	Male 30+	Female 18-29	Female 30+	Trans M-F 18-29	Trans M-F 30+	Trans F-M 18-29	Trans F-M 30+
Hispanic/Latino	0	4	0	0	0	0	0	0
Non-Hispanic/Latino	0	0	0	0	0	0	0	0
Unknown	0	0	0	0	0	0	0	0
Declined	0	0	0	0	0	0	0	0
TOTAL	0	4	0	0	0	0	0	0

Enrollee Demographics								
Clients Served	Male 18-29	Male 30+	Female 18-29	Female 30+	Trans M-F 18-29	Trans M-F 30+	Trans F-M 18-29	Trans F-M 30+
American Indian/Alaska Native	0	0	0	0	0	0	0	0
Asian	0	0	0	0	0	0	0	0
Black/African American	0	4	0	0	0	0	0	0
Hawaiian/ Pacific Islander	0	0	0	0	0	0	0	0
White	0	19	22	0	0	0	0	0
Other races	0	23	0	0	0	0	0	0
Declined	0	0	0	0	0	0	0	0
TOTAL	0	46	22	0	0	0	0	0

Appendix D: MaineGeneral Medical Center – Waterville 11/01/22-10/31/23

Operator: MaineGeneral Medical Center

Location of Site: Thayer Center for Health, 149 North Street, Terrace Level,

Waterville Established Date: 2018

Indicator	Quantity
Total enrolled	210
New enrollees, total	56
Number of HIV Tests conducted with new enrollees	5
Total number of HIV Tests conducted with exchange consumers	9
Number of syringes collected, total	130,893
Number of syringes disposed, total	130,893
Number of syringes distributed without exchange at enrollment	1,500
Syringes distributed, total	136,642
Number of initial exchange kits distributed	17
Total exchanges	400
Number of off-site exchanges	0
Total referrals made	2,025
Total number of clients who receive a “starter kit”	17

Number of Referrals Made	Quantity
Primary Care/Medical Care	26
STD clinic	0
HIV testing	68
Hepatitis Testing	76
Substance Use Treatment	12
Housing	18
Peer Support	0
Overdose Aftercare	0
Food Assistance	85
Case Management	0
Other: Narcan Distribution & Education	714
Other: Basic Needs	149
Drug Testing Kits & Education	802
Other: Patient Navigator	0
Other: Education	75
Total Referrals Made	2,025

Enrollee Demographics											
Clients Served	Unknown	Declined 18-29	Declined 30+	Male 18-29	Male 30+	Female 18-29	Female 30+	Trans M-F 18-29	Trans M-F 30+	Trans F-M 18-29	Trans F-M 30+
Hispanic/Latino	0	0	1	0	3	0	0	0	0	0	0
Non-Hispanic/Latino	0	0	9	13	86	9	76	0	0	0	0
Unknown	0	0	0	0	2	0	0		0	0	0
Declined	0		2	0	7	1	1	0	0	0	0
TOTAL	0	0	12	13	98	10	77	0	0	0	0

Enrollee Demographics											
Clients Served	Unknown	Declined 18-29	Declined 30+	Male 18-29	Male 30+	Female 18-29	Female 30+	Trans M-F 18-29	Trans M-F 30+	Trans F-M 18-29	Trans F-M 30+
American Indian/Alaska Native	0	0	0	1	0	0	0	0	0	0	0
Asian	0	0	0	0	0	0	0	0	0	0	0
Black/African American	0	0	0	0	1	0	0	0	0	0	0
Hawaiian/Pacific Islander	0	0	0	0	0	0	0	0	0	0	0
White	0	0	11	12	96	10	77	0	0	0	0
Other races	0	0	0	0	0	0	0	0	0	0	0
Declined	0	0	1	0	1	0	0	0	0	0	0
Total	0	0	12	13	98	10	77	0	0	0	0

Appendix E: MaineGeneral Medical Center – Augusta 11/01/22-10/31/23

Operator: MaineGeneral Medical

Center Location of Site: 9 Green

Street, Augusta

Established Date: December 2004

Indicator	Quantity
Total enrolled	1,107
New enrollees, total	65
Number of HIV Tests conducted with new enrollees	14
Total number of HIV Tests conducted with exchange consumers	28
Total number of syringes collected	223,611
Total number of syringes disposed	223,611
Number of syringes distributed without exchange at enrollment	2,520
Total syringes distributed	215,979
Number of initial exchange kits distributed	29
Total exchanges	839
Number of off-site exchanges	0
Total referrals made	3,487
Total number of clients who receive a “starter kit”	29

Number of Referrals Made	Quantity
Primary Care/Medical Care	38
STD clinic	0
HIV testing	166
Hepatitis Testing	152
Substance Use Treatment	18
Housing	49
Peer Support	1
Overdose Aftercare	0
Food Assistance	111
Case Management	0
Other: Narcan Distribution & Education	808
Other: Basic Needs	288
Drug Testing Kits & Education	1,633
Other: Patient Navigator	0
Other: Education	223
Total Referrals Made	3,487

Enrollee Demographics											
Clients Served	Unknown	Declined 18-29	Declined 30+	Male 18-29	Male 30+	Female 18-29	Female 30+	Trans M-F 18-29	Trans M-F 30+	Trans F-M 18-29	Trans F-M 30+
Hispanic/Latino	0	0	1	1	12	0	11	0	0	0	0
Non-Hispanic/Latino	275	0	4	37	419	22	294	0	1	1	0
Unknown	0	0	0	0	4	1	1	0	0	0	0
Declined	0	1	1	3	9	2	7	0	0	0	0
TOTAL	275	1	6	41	444	25	313	0	1	1	0

Enrollee Demographics											
Clients Served	Unknown	Declined 18-29	Declined 30+	Male 18-29	Male 30+	Female 18-29	Female 30+	Trans M-F 18-29	Trans M-F 30+	Trans F-M 18-29	Trans F-M 30+
American Indian/Alaska Native	0	0	0	0	27	0	16	0	1	0	0
Asian	0	0	0	0	4	0	6	0	0	0	0
Black/African American	0	0	0	3	3	1	2	0	0	0	0
Hawaiian/Pacific Islander	0	0	0	0	0	0	0	0	0	0	0
White	275	0	5	38	407	24	285	0	0	1	0
Other races	0	0	0	0	2	0	3	0	0	0	0
Declined	0	1	1	0	1	0	0	0	0	0	0
Two or more	0	0	0	0	0	0	1	0	0	0	0
TOTAL	275	1	6	41	444	25	313	0	1	1	0

Appendix F: Maine Access Points – Rumford 11/01/22-10/31/23

Operator: Maine Access Points

Location of Site: Rumford

Established Date: 2020, services began June 2022

Indicator	Quantity
Total enrolled	155
New enrollees, total	121
Number of HIV Tests conducted with new enrollees	11
Total number of HIV Tests conducted with exchange consumers	30
Number of syringes collected, total	200,722
Number of syringes disposed, total	200,722
Number of syringes distributed without exchange at enrollment	0
Syringes distributed, total	208,217
Number of initial exchange kits distributed	8
Total exchanges	281
Number of off-site exchanges	0
Total referrals made	1,188
Total number of clients who receive a “starter kit”	0

Number of Referrals Made	Quantity
Primary Care	9
STD clinic	2
HIV testing	31
Hepatitis Testing	2
Substance Abuse Treatment	4
Housing	4
Peer Support	4
Overdose Aftercare	236
Food Assistance	116
Case Management	6
Other: Clothing services	3
Other: Covid-testing/ vaccine	10
Other: Covid Rental Assistance	78
Other: Community Organizing	0
Other: Mental health services	30
Other: Drug checking education and fentanyl test strips	3
Other: Overdose prevention education and naloxone distribution	202
Other: Legal assistance	216
Other: Education/ work	1
Other: Wound care/ Health education	199
Other: Transportation	31
Other: Intimate Partner Violence	4
Other: Infectious disease specialty care	1
Total Referrals Made	1,188

Enrollee Demographics								
Clients Served	Male 18-29	Male 30+	Female 18-29	Female 30+	Trans M-F 18-29	Trans M-F 30+	Trans F-M 18-29	Trans F-M 30+
Hispanic/Latino	0	4	2	0	0	0	0	0
Non-Hispanic/Latino	4	37	12	43	0	0	0	0
TOTAL	4	41	14	43	0	0	0	0

Enrollee Demographics								
Clients Served	Male 18-29	Male 30+	Female 18-29	Female 30+	Trans M-F 18-29	Trans M-F 30+	Trans F-M 18-29	Trans F-M 30+
American Indian/ Alaska Native	0	0	0	1	0	0	0	0
Asian	0	0	0	0	0	0	0	0
Black/African American	0	1	0	1	0	0	0	0
Hawaiian/ Pacific Island	0	0	0	0	0	0	0	0
White	4	44	14	41	0	0	0	0
Other races	0	0	0	0	0	0	0	0
TOTAL	4	45	14	43	0	0	0	0

Appendix G: Maine Access Points – Calais 11/01/22-10/31/23

Operator: Maine Access Points

Location of Site: Calais

Established Date: 2021

Indicator	Quantity
Total enrolled	108
New enrollees, total	29
Number of HIV tests conducted with new enrollees	2
Total number of HIV tests conducted with exchange consumers	2
Number of syringes collected, total	69,599
Number of syringes disposed, total	69,599
Number of syringes distributed without exchange at enrollment	0
Syringes distributed, total	73,554
Number of initial exchange kits distributed	4
Total exchanges	136
Number of off-site exchanges	0
Total referrals made	618
Total number of clients who receive a “starter kit”	0

Number of Referrals Made	Quantity
Primary Care	18
STD clinic	4
HIV testing	0
Hepatitis Testing	12
Substance Abuse Treatment	59
Housing	26
Peer Support and/or recovery coaching	97
Overdose Aftercare	30
Food Assistance	31
Case Management	1
Other: Clothing services	11
Other: Covid-testing/ vaccine	54
Other: Covid Rental Assistance	1
Other: Community Organizing	20
Other: Mental health services	17
Other: Drug checking education and fentanyl test strips	27
Other: Overdose prevention education and naloxone distribution	74
Other: Legal assistance	0
Other: Education/ work	16
Other: Wound care/ Health education	53
Other: Transportation	29
Other: Intimate Partner Violence	7
Other: Daycare & Child mental health	1

Number of Referrals Made	Quantity
Other: Pet	1
Other: HEAP	3
Other: Family/ affected-other supports	24
Other: VA	2
TOTAL	618

Enrollee Demographics								
Clients Served	Male 18-29	Male 30+	Female 18-29	Female 30+	Trans M-F 18-29	Trans M-F 30+	Trans F-M 18-29	Trans F-M 30+
Hispanic/Latino	0	0	0	0	0	0	0	0
Non-Hispanic/Latino	3	10	4	7	0	0	0	0
TOTAL	3	10	4	7	0	0	0	0

Enrollee Demographics								
Clients Served	Male 18-29	Male 30+	Female 18-29	Female 30+	Trans M-F 18-29	Trans M-F 30+	Trans F-M 18-29	Trans F-M 30+
American Indian/ Alaska Native	0	0	0	0	0	0	0	0
Asian	0	0	0	0	0	0	0	0
Black/African American	0	0	0	0	0	0	0	0
Hawaiian/ Pacific Island	0	0	0	0	0	0	0	0
White	3	10	4	7	0	0	0	0
Other races	0	0	0	0	0	0	0	0
TOTAL	3	10	4	7	0	0	0	0

Appendix H: Maine Access Points – Sanford 11/01/22-10/31/23

Operator: Maine Access Points

Location of Site: Sanford

Established Date: 2020

Indicator	Quantity
Total enrolled	511
New enrollees, total	272
Number of HIV Tests conducted with new enrollees	1
Total number of HIV Tests conducted with exchange consumers	4
Number of syringes collected, total	440,998
Number of syringes disposed, total	440,998
Number of syringes distributed without exchange at enrollment	0
Syringes distributed, total	460,720
Number of initial exchange kits distributed	13
Total exchanges	1,485
Number of off-site exchanges	0
Total referrals made	2,641
Total number of clients who receive a “starter kit”	0

Number of Referrals Made	Quantity
Primary Care	21
STD clinic	5
HIV testing	4
Hepatitis Testing	3
Substance Abuse Treatment/MOUD Services	26
Housing	47
Peer Support	771
Overdose Aftercare	97
Food Assistance	72
Case Management	18
Other: Clothing services	146
Other: Community Organizing	30
Other: Mental health services	26
Other: Drug checking education and fentanyl test strips	306
Other: Covid-testing/ vaccine	41
Other: Covid Rental Assistance	0
Other: Overdose prevention education and naloxone distribution	677
Other: Legal assistance	4
Other: Education/ work	3
Other: Wound care/ Health education	298
Other: Transportation	38
Other: Intimate Partner Violence	9
Total Referrals Made	2,641

Enrollee Demographics								
Clients Served	Male 18-29	Male 30+	Female 18-29	Female 30+	Trans M-F 18-29	Trans M-F 30+	Trans F-M 18-29	Trans F-M 30+
Hispanic/Latino	0	0	1	0	0	0	0	0
Non-Hispanic/Latino	20	95	22	103	0	0	0	0
TOTAL	20	95	23	103	0	0	0	0

Enrollee Demographics								
Clients Served	Male 18-29	Male 30+	Female 18-29	Female 30+	Trans M-F 18-29	Trans M-F 30+	Trans F-M 18-29	Trans F-M 30+
American Indian/ Alaska Native	0	0	1	2	0	0	0	0
Asian	0	0	0	0	0	0	0	0
Black/African American	2	1	0	2	0	0	0	0
Hawaiian/ Pacific Island	0	0	0	0	0	0	0	0
White	18	94	22	99	0	0	0	0
Other races	0	0	0	0	0	0	0	0
TOTAL	20	95	23	103	0	0	0	0

Appendix I: Maine Access Points – Machias 11/01/22-10/31/23

Operator: Maine Access Points Location: Machias

Established Date: 2021

Indicator	Quantity
Total enrolled	103
New enrollees, total	32
Number of HIV Tests conducted with new enrollees	0
Total number of HIV Tests conducted with exchange consumers	0
Number of syringes collected, total	73,718
Number of syringes disposed, total	73,718
Number of syringes distributed without exchange at enrollment	0
Syringes distributed, total	79,806
Number of initial exchange kits distributed	1
Total exchanges	224
Number of off-site exchanges	0
Total referrals made	824
Total number of clients who receive a “starter kit”	0

Number of Referrals Made	Quantity
Primary Care	41
STD clinic	1
HIV testing	2
Hepatitis Testing	12
Substance Abuse Treatment	82
Housing	35
Peer support and/or recovery coaching	151
Overdose Aftercare	54
Food Assistance	28
Case Management	2
Other: Clothing services	17
Other: Covid-testing/ vaccine	41
Other: Covid Rental Assistance	0
Other: Community Organizing	12
Other: Mental health services	21
Other: Drug checking education and fentanyl test strips	59
Other: Overdose prevention education and naloxone distribution	99
Other: Legal assistance	3
Other: Education/ work	18
Other: Wound care/ Health education	79
Other: Transportation	35
Other HEAP:	12
Other: Mainecare	1
Other Pet:	2
Other: Intimate Partner Violence	12
Other: Family/ affected other	6
Total Referrals Made	824

Enrollee Demographics								
Clients Served	Male 18-29	Male 30+	Female 18-29	Female 30+	Trans M-F 18-29	Trans M-F 30+	Trans F-M 18-29	Trans F-M 30+
Hispanic/Latino	0	0	0	0	0	0	0	0
Non-Hispanic/Latino	2	8	4	14	0	0	0	0
TOTAL	2	8	4	14	0	0	0	0

Enrollee Demographics								
Clients Served	Male 18-29	Male 30+	Female 18-29	Female 30+	Trans M-F 18-29	Trans M-F 30+	Trans F-M 18-29	Trans F-M 30+
American Indian/ Alaska Native	1	2	0	1	0	0	0	0
Asian	0	0	0	0	0	0	0	0
Black/African American	0	0	0	0	0	0	0	0
Hawaiian/ Pacific Island	0	0	0	0	0	0	0	0
White	1	6	4	13	0	0	0	0
Other races	0	0	0	0	0	0	0	0
TOTAL	2	8	4	14	0	0	0	0

Appendix J: Health Equity Alliance – Bangor 11/01/22-10/31/23

Operator: Down East AIDS Network/Health Equity Alliance

Location of Site: 304 Hancock Street Suite 3B, Bangor, ME 04401

Established Date: 2002

Indicator	Quantity
Total enrolled	1,062
New enrollees, total	302
Number of HIV Tests conducted with new enrollees	0
Total number of HIV Tests conducted with exchange consumers	51
Number of syringes collected, total	591,138
Number of syringes disposed, total	591,138
Number of syringes distributed without exchange at enrollment	0
Syringes distributed, total	658,627
Number of initial exchange kits distributed	302
Total exchanges	5,023
Number of off-site exchanges	1
Total referrals made	2,192
Total number of clients who receive a “starter kit”	237

Number of Referrals Made	Quantity
Primary Care	31
STD clinic	52
HIV testing	51
Hepatitis Testing	63
Substance Abuse Treatment	79
Housing	229
Peer support and/or recovery coaching	981
Overdose Aftercare	0
Food Assistance	92
Case Management	981
Other: Social Services	578
Total Referrals Made	3,137

Enrollee Demographics								
Clients Served	Male 18-29	Male 30+	Female 18-29	Female 30+	Trans M-F 18-29	Trans M-F 30+	Trans F-M 18-29	Trans F-M 30+
Hispanic/Latino	4	1	1	3	0	0	0	0
Non-Hispanic/Latino	173	331	107	208	0	0	0	0
TOTAL	177	332	108	211	0	0	0	0

Enrollee Demographics								
Clients Served	Male 18-29	Male 30+	Female 18-29	Female 30+	Trans M-F 18-29	Trans M-F 30+	Trans F-M 18-29	Trans F-M 30+
American Indian/ Alaska Native	6	15	9	16	0	0	0	0
Asian	0	0	0	0	0	0	0	0
Black/African American	2	3	0	1	0	0	0	0
Hawaiian/ Pacific Island	0	0	0	0	0	0	0	0
White	155	283	96	183	2	0	1	2
Other races	10	30	2	8	0	0	0	0
TOTAL	173	332	108	211	2	0	1	2

Appendix K: Health Equity Alliance – Ellsworth 11/1/2022 – 10/31/2023

Operator: Down East AIDS Network/Health Equity Alliance

Location of Site: 5 Long Lane Suite 1, Ellsworth, ME 04605

Established Date: 2000

Indicator	Quantity
Total enrolled	247
New enrollees, total	36
Number of HIV Tests conducted with new enrollees	0
Total number of HIV Tests conducted with exchange consumers	0
Number of syringes collected, total	131,945
Number of syringes disposed, total	131,945
Number of syringes distributed without exchange at enrollment	0
Syringes distributed, total	128,133
Number of initial exchange kits distributed	0
Total exchanges	1,295
Number of off-site exchanges	0
Total referrals made	44
Total number of clients who receive a “starter kit”	43

Number of Referrals Made	Quantity
Primary Care	19
STD clinic	3
HIV testing	0
Hepatitis Testing	0
Substance Abuse Treatment	1
Housing	0
Peer support and/or recovery coaching	0
Overdose Aftercare	0
Food Assistance	3
Case Management	0
Total Referrals Made	26

Enrollee Demographics								
Clients Served	Male 18-29	Male 30+	Female 18-29	Female 30+	Trans M-F 18-29	Trans M-F 30+	Trans F-M 18-29	Trans F-M 30+
Hispanic/Latino	0	1	0	0	0	0	0	0
Non-Hispanic/ Latino	33	78	25	49	0	0	0	0
TOTAL	33	79	25	49	0	0	0	0

Enrollee Demographics								
Clients Served	Male 18-29	Male 30+	Female 18-29	Female 30+	Trans M-F 18-29	Trans M-F 30+	Trans F-M 18-29	Trans F-M 30+
American Indian/ Alaska Native	0	2	2	1	0	0	0	0
Asian	0	0	0	0	0	0	0	0
Black/African American	0	0	0	0	0	0	0	0
Hawaiian/ Pacific Island	0	0	0	0	0	0	0	0
White	32	67	20	43	0	0	0	0
Other races	1	9	3	5	0	0	0	0
TOTAL	33	78	25	49	0	0	0	0

Appendix L: Wabanaki Public Health and Wellness – Bangor 11/01/22-10/31/23

Operator: Wabanaki Public Health and Wellness

Location of Site: 157 Park Street 32A Bangor, ME

Established Date: 2021

Indicator	Quantity
Total enrolled	11
New enrollees, total	4
Number of HIV Tests conducted with new enrollees	1
Total number of HIV Tests conducted with exchange consumers	1
Number of syringes collected, total	802
Number of syringes disposed, total	802
Number of syringes distributed without exchange at enrollment	0
Syringes distributed, total	80
Number of initial exchange kits distributed	2
Total exchanges	5
Number of off-site exchanges	0
Total referrals made	1
Total number of clients who receive a “starter kit”	3

Number of Referrals Made	Quantity
Primary Care	0
STD clinic	0
HIV testing	1
Hepatitis Testing	0
Substance Abuse Treatment	0
Housing	0
Peer support and/or recovery coaching	0
Overdose Aftercare	0
Food Assistance	0
Case Management	0
Total Referrals Made	1

Enrollee Demographics								
Clients Served	Male 18-29	Male 30+	Female 18-29	Female 30+	Trans M-F 18-29	Trans M-F 30+	Trans F-M 18-29	Trans F-M 30+
Hispanic/Latino	0	0	0	0	0	0	0	0
Non-Hispanic/Latino	0	8	0	3	0	0	0	0
TOTAL	0	8	0	3	0	0	0	0

Enrollee Demographics								
Clients Served	Male 18-29	Male 30+	Female 18-29	Female 30+	Trans M-F 18-29	Trans M-F 30+	Trans F-M 18-29	Trans F-M 30+
American Indian/ Alaska Native	0	8	0	3	0	0	0	0
Asian	0	0	0	0	0	0	0	0
Black/African American	0	0	0	0	0	0	0	0
Hawaiian/ Pacific Island	0	0	0	0	0	0	0	0
White	0	0	0	0	0	0	0	0
Other races	0	0	0	0	0	0	0	0
TOTAL	0	8	0	3	0	0	0	0

Appendix M: Church of Safe Injection – Lewiston 11/01/22-10/31/23

Operator: Church of Safe Injection

Location of Site: Lewiston, established February 2021

Established Date: 2018, Certified in 2021

Indicator	Quantity
Total enrolled (YTD)	1144
New enrollees, total	425
Number of HIV Tests conducted with new enrollees	0
Total number of HIV Tests conducted with exchange consumers	40
Number of syringes collected, total	19,9409
Number of syringes disposed, total	199,409
Number of syringes distributed without exchange at enrollment	0
Syringes distributed, total	324,423
Number of initial exchange kits distributed	52
Total exchanges	5,100
Number of off-site exchanges	0
Total referrals made	6,501
Total number of clients who receive a “starter kit”	N/A

Number of Referrals Made	Quantity
Primary Care/Medical Care	329
STD clinic	301
HIV testing	57
Hepatitis Testing	72
Substance Use Treatment	261
Housing	206
Peer Support	657
Overdose Aftercare	2,677
Food Assistance	131
Case Management	209
Other: Wound Care Supplies & Education	886
Other: Injection techniques	633
Other: Recovery Residences	4
Total Referrals Made	6,423

Enrollee Demographics

Clients Served	Unknown	Declined 18-29	Declined 30+	Male 18-29	Male 30+	Female 18-29	Female 30+	Trans M-F 18-29	Trans M-F 30+	Trans F-M 18-29	Trans F-M 30+
Hispanic/Latino	0	0	0	5	12	5	3	0	0	0	0
Non-Hispanic/Latino	0	0	0	223	446	122	327	0	0	2	1
Unknown	0	0	0	0	0	0	0	0	0	0	0
Declined	0	0	0	0	0	0	0	0	0	0	0
TOTAL	0	0	0	228	458	127	330	0	0	2	1

Enrollee Demographics

Clients Served	Unknown	Declined 18-29	Declined 30+	Male 18-29	Male 30+	Female 18-29	Female 30+	Trans M-F 18-29	Trans M-F 30+	Trans F-M 18-29	Trans F-M 30+
American Indian/Alaska Native	0	0	0	0	0	0	0	0	0	0	0
Asian	0	0	0	0	0	1	0	0	0	0	0
Black/African American	0	0	0	3	23	4	3	0	0	0	0
Hawaiian/ Pacific Islander	0	0	0	0	0	0	0	0	0	0	0
White	0	0	0	225	432	121	325	0	0	2	1
Other races	0	0	0	0	3	1	2	0	0	0	0
Declined	0	0	0	0	0	0	0	0	0	0	0
Two or more	0	0	0	0	0		0		0	0	0
TOTAL	0	0	0	228	458	127	330	0	0	2	1

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