

Syringe Service Programs in Maine

2021 Annual Report

A Report to the State of Maine Legislature
Joint Standing Committee on Health and Human Services
and
Joint Standing Committee on Judiciary

Submitted by:
Maine Center for Disease Control and Prevention
Maine Department of Health and Human Services
January 2022



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About this Report

Maine law 22 MRSA c.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, 2020, through October 31, 2021.

Report Author

This report was prepared by the following staff of the Viral Hepatitis Prevention Unit, within the Maine Center for Disease Control and Prevention’s Infectious Disease Prevention Program.

Lauren Gauthier, MPH

Interim Viral Hepatitis Prevention Coordinator, Infectious Disease Prevention Program Director

For correspondence about this report: Lauren.Gauthier@maine.gov; 207.287.5551

A Brief Overview of Syringe Service Programs in Maine

During the reporting period, Maine had 17 certified Syringe Service Programs (SSP) operating in the communities of Portland, Augusta, Waterville, Bangor, Belfast, Ellsworth, Sanford, Calais, Lewiston, Caribou, Deer Isle, Rockland, and Machias. Under the Governor's Executive Order 27 issued during this reporting period, sites had the option of mailing supplies and educational materials in accordance with COVID-19 social distancing practices. These 17 locations are operated by seven organizations; City of Portland, MaineGeneral Medical Center, Maine Access Points, TriCounty Mental Health Services, Amistad, Wabanaki Public Health and Wellness, and Health Equity Alliance. The location in Portland, operated by the City of Portland, is Maine's first, opening in 1998. Wabanaki Public Health and Wellness' Bangor site is the newest location, opening in July 2021. Church of Safe Injection (CoSI) was the newest agency to certify in 2021 in the following locations: Bethel, Dixfield, Rumford, Lewiston, and Westbrook. However, CoSI was not operational during the reporting period. All certified SSPs are required to submit their data quarterly to the Maine Center for Disease Control and Prevention (Maine CDC).

In 2021, Maine's SSPs:

- Collected 2,024,707 used syringes
- Distributed 2,703,080 new syringes
- Had 5,284 enrolled participants
- Enrolled 1,865 new participants
- Made 5,481 referrals to services such as primary care, STD clinics, HIV and hepatitis testing, substance use treatment, peer support, recovery coaches, overdose aftercare, food, housing, transportation, health insurance benefits, mental health services, and other social supports.
- Conducted 78 HIV tests
- Distributed naloxone to 1,492 individuals

Executive Summary

The Maine Department of Health and Human Services' (DHHS) Center for Disease Control and Prevention (Maine CDC) is authorized by 22 MRSA c.252-A, §1341(1) ("Hypodermic Apparatus Exchange Programs") to certify hypodermic apparatus exchange programs (also known as Syringe Service Programs) to facilitate the prevention of HIV and other blood borne pathogens. This report is required by statute (22 MRSA c.252-A, §1341(3)), and reflects the syringe service activities conducted by the certified program sites in Maine for the period from November 1, 2020 to October 31, 2021.

PL 2017, Ch. 507 established the certification of Syringe Service Programs (SSP) by DHHS for those programs that meet the requirements established by statute (22 MRSA c.252-A, §1341(2)). Additional regulatory rules were also promulgated through this statute (10-144 CMR c.252). PL 2018, Ch. 464, (introduced as LD 1707, *An Act To Reduce the Cost of Care Resulting from Blood-borne Infectious Diseases*) provided ongoing funds to support SSPs.

In 2019, Maine CDC released the "Vulnerability Assessment for Opioid Overdoses and Bloodborne Infections Associated with Non-Sterile Injection Drug Use in Maine."¹ This report shows the geographic areas where residents are at highest risk of opioid overdoses and bloodborne infections from injection drug use. These most vulnerable areas are Kennebec County, Penobscot County, the Portland area of Cumberland County, Somerset County, and Washington County. The Vulnerability Assessment makes recommendations for interventions that strategically allocate resources to the highest risk areas, including to support the opening of SSPs in the most vulnerable areas and expand the operating hours and staff at the already existing SSP locations.

In response to the vulnerability assessment, Governor Janet Mills announced additional funding, through the Fund for Healthy Maine, for the two-year budget cycle making available approximately \$2 million for both existing, certified SSPs and newly certified SSPs. This initiative allowed for the expansion of certified SSPs sites from seven, in 2019, to eleven in 2020, across five agencies.

In January 2021, building on the success of the previous two-year funding award through the Fund for Health Maine, Maine CDC was awarded \$800,000 through the Opioid Use Disorder Prevention and Treatment Fund to continue supporting SSPs through June 30, 2022. This funding allowed for further expansion to 22 sites across eight agencies.

During this reporting period, SSPs were supported through the ongoing General Fund appropriation and the Opioid Use Disorder Prevention and Treatment Fund. No federal funds were used to support SSP activities at the sites during this reporting period. The ban on using federal funds to support SSP activities was lifted on January 6, 2016.²

In March of 2020, Governor Janet Mills proclaimed a State of Civil Emergency for the state of Maine to respond to and reduce the transmission of SARS-nCoV-2 (COVID-19). The pandemic dramatically changed how SSPs operated due to infection control measures, social distancing, and COVID-19 safety

¹ Maine Center for Disease Control and Prevention (2019). Vulnerability Assessment for Opioid Overdoses and Bloodborne Infections Associated with Non-Sterile Injection Drug Use in Maine.

<https://www.maine.gov/dhhs/mecdc/navtabs/documents/Maine-CDC-Vulnerability-Assessment-Report.pdf>

² *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>

precautions. In response to the pandemic's effect on people who inject drugs, effective March 30th, Governor Janet Mills issued Executive Order 27 (EO27) ("An Order Regarding State Certified Hypodermic Apparatus Exchange Programs"), which reduced barriers to clients of SSPs to continue operation in ways that reduce the spread of COVID-19 in keeping with US CDC's interim guidance for syringe services programs.³

Under EO27, syringe service programs were allowed to suspend the one-to-one needle exchange limit, resulting in a needs-based exchange; SSPs could expand their operation outside of their approved physical location so long as it is within the same municipality and Maine CDC was notified; hours of operation could be expanded or contracted with Maine CDC notification; and SSPs could mail supplies (including biohazard waste containers) to the extent permitted by federal law.

In January 2021, Maine released the "Maine Opioid Response: 2021 Strategic Action Plan"⁴ to address the epidemic of substance use disorder (SUD), particularly opioid use disorder (OUD) and its impact in the state. One of the strategies provided, Strategy 17, aims to "increase awareness, understanding, and utilization of harm reduction strategies and resources." Under Strategy 17, Maine aims to continue to fund and expand sterile syringe access in 2021 and to prioritize the evaluation of safe supply programs and implementation effective harm reduction programs in the future.

On February 24, 2021, Governor Mills further expanded services to SSPs through Executive Order 33 (EO33) ("An Order Amending Executive Orders 16 FY 19/20, 21 FY 19/20, 27 FY 19/20, and 36 FY 19/20"). EO33 allowed SSPs to offer services outside of their certified location so long as it was within the county in which they were originally certified. This greatly increased access for clients who were transitory across city limits due to the COVID-19 pandemic.

On June 20, 2021, EO33 was extended through Executive Order 98 (EO98) ("An Order Providing an Orderly Transition Following the Termination of the State of Civil Emergency"). It extended the provisions in EO33 through August 30, 2021. Thus, many of the data reported in the 2021 Annual Report reflect the result of 10 months of COVID-19 accommodations and provisions.

In July of 2021, the Legislature repealed, and Governor Mills signed into law, the decriminalization of possession and furnishing of syringes with residual amounts of any scheduled drug and drug testing equipment. PL 2021, Ch. 434 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.

Seven state-certified SSPs operated 17 sites in Maine during this reporting period:

- The City of Portland operates one site in Portland.
- Amistad operates one site in Portland.
- Down East AIDS Network/Health Equity Alliance operates sites in Bangor, Ellsworth, Machias, Belfast, Rockland, Deer Isle, and Calais.

³ US Centers for Disease Control and Prevention. Interim Guidance for Syringe Services Programs, <https://www.cdc.gov/coronavirus/2019-ncov/php/syringe-service-programs.html>

⁴ State of Maine. Governor's Office of Policy Innovation and the Future. Maine Opioid Response: 2021 Strategic Action Plan. <https://www.maine.gov/future/sites/maine.gov/future/files/inline-files/Strategic%20Action%20Plan%202021.Full%20Plan.1.31.21%20FINAL.pdf>

- MaineGeneral Medical Center/Health Reach Harm Reduction operates sites in Augusta and Waterville.
- Maine Access Points operates sites in Sanford, Caribou, Machias, and Calais. Under EO27, Maine Access Points also operated a mailing syringe service program.
- Tri-County Mental Health Services operates a site in Lewiston.
- Wabanaki Public Health and Wellness operates a site in Bangor.

For agency-specific information and data, please see Attachments A through Q.

Syringe Service Programs have significant, measurable benefits for the communities they serve:

- Reduce the risk of bloodborne infection, like hepatitis B and C and HIV, and prevent outbreaks⁵
- Reduce new hepatitis C and HIV cases by an estimated 50%⁶
- Provide an important link to other health services, including bloodborne pathogen testing, treatment for hepatitis B and C and HIV, and medication-assisted treatment (MAT) for opioid use disorder⁷
- When a person who participates in an SSP is enrolled in MAT for opioid dependency, the transmission of bloodborne pathogens is reduced by two-thirds^{8,9}
- 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 SSP¹⁰

⁵ *Centers for Disease Control and Prevention*. Syringe Service Programs Fact Sheet, <https://www.cdc.gov/ssp/syringe-services-programs-factsheet.html>

⁶ 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.

⁷ *Centers for Disease Control and Prevention*. HIV and Injection Drug Use, [HIV and Injection Drug Use – Vital Signs – CDC. Centers for Disease Control and Prevention](#). Published December 2016.

⁸ 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.

⁹ Fernandes RM, Cary M, Duarte G, et al. Effectiveness of needle and syringe programmes in people who inject drugs – An overview of systematic reviews. *BMC Public Health*. 2017;17(1):309. doi:10.1186/s12889-017-4210-2.

¹⁰ 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.

- SSPs help to prevent overdose deaths by providing naloxone to members, and teaching enrollees how to recognize an overdose and administer that naloxone^{11,12,13,14,15,16}
- SSPs reduce the number of discarded used syringes in communities¹⁷

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 2014 to 2020, acute hepatitis A rates increased 1,700%, acute hepatitis B rates increased 233% and acute hepatitis C rates increased 565%. These figures reflect new, acute cases, which serve as an indicator of the rising burden of these illnesses. Since 2019, Maine continues to be part of a widespread person-to-person outbreak of hepatitis A across the United States.

The COVID-19 pandemic has greatly impacted the disease burden among certain groups at increased risk of acquiring hepatitis A, like people who use drugs (injection or non-injection), people experiencing unstable housing or homelessness, and people who are currently or recently incarcerated. Among these groups access to hygienic supplies, housing, and vaccines has been difficult during the pandemic.

In 2019, the last year federal data are available, Maine had the highest acute hepatitis B rate, the 4th highest acute hepatitis C rate, and the 14th highest opioid overdose death rate in the United States.¹⁸ Public health officials identified a link between the opioid epidemic and the spread of bloodborne infections such as human immunodeficiency virus (HIV), hepatitis B, and hepatitis C.¹⁹ In Maine, as is nationwide²⁰, 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. Fatal overdoses rose

¹¹ 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/jurban/jti053.

¹² 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.

¹³ 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.

¹⁴ 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.

¹⁵ 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.

¹⁶ 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.

¹⁷ 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.

¹⁸ *Centers for Disease Control and Prevention*. 2019 Viral Hepatitis Surveillance Report. <https://www.cdc.gov/hepatitis/statistics/SurveillanceRpts.htm>. Published July 2021.

¹⁹ *Centers for Disease Control and Prevention*. Viral Hepatitis Surveillance – United States, 2018. <https://www.cdc.gov/hepatitis/statistics/SurveillanceRpts.htm>

²⁰ *Centers for Disease Control and Prevention*. Syringe Services Programs Fact Sheet, <https://www.cdc.gov/ssp/syringe-services-programs-factsheet.html>

33% from 2019 to 2020 in Maine. Eighty-three percent of deaths were cases by opioids. The number of drug deaths continues to remain high in 2021.²¹

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

All certified SSPs are required to submit their data annually to the Maine CDC. In 2021, 5,403 individuals were enrolled in SSPs. This is a 5.7% decrease from 2020. Current statute and DHHS regulation require a one-to-one exchange except in the initial enrollment exchange when ten unused syringes can be distributed for future exchanges. However, under EO27, effective March 15th, 2020 through August 30, 2021, SSPs were able to suspend the one-to-one limit during the State of Civil Emergency. The certified SSPs collected a total of 2,024,707 used syringes from the 5,403 enrolled individuals, which is an average of 375 syringes exchanged per person. The 2,024,707 used syringes were collected during 20,391 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 99 syringes exchanged per visit. The 5,403 enrolled individuals visited certified SSPs 20,391 times in 2021, which is an average of 3.8 visits per person. This is an increase over 2020, when the average number of visits per person was 2.9.

In 2021, though the number of clients enrolled decreased SSPs were able to increase the number of new enrollees compared to 2020. There was also a 132% increase in the number of referrals from 2020 to 2021. There were 226 referrals for HIV testing, 105 referrals for STD testing, and 269 referrals for Hepatitis C testing offered. SSP staff made a total of 180 referrals to primary care providers, 390 to substance use treatment programs, and 233 to housing assistance programs. There were 609 referrals to peer support or recovery coaches. There were 475 referrals made to food assistance programs and food pantries. Additionally, there were 150 referrals to overdose aftercare for those clients who experienced a nonfatal drug overdose. There were 282 referrals to General Assistance and basic needs programs. There were 114 referrals to wound care. SSPs were 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. Of the 1,492 referrals to the overdose prevention education and naloxone distribution program served clients in Bangor, Sanford, Caribou, and Portland.

Much of the data submitted in 2021 is greatly affected by the pandemic and expansion of 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. However, 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 towns. Many SSPs provided educational brochures and communication from Maine's Department of Environmental Protection on safe disposal of household medical sharps. This allowed clients to safely dispose of syringes while maintaining social distancing guidelines. SSPs were an essential resource for many clients particularly those who are unstably housed by providing hygiene kits, food, masks, hand sanitizer, and warm clothing to clients.

²¹ Maine Drug Data Hub, <https://mainedrugdata.org/>

²² Centers for Disease Control and Prevention, <https://www.cdc.gov/hepatitis>

²³ Centers for Disease Control and Prevention, <https://www.cdc.gov/hepatitis>

²⁴ Ibid.

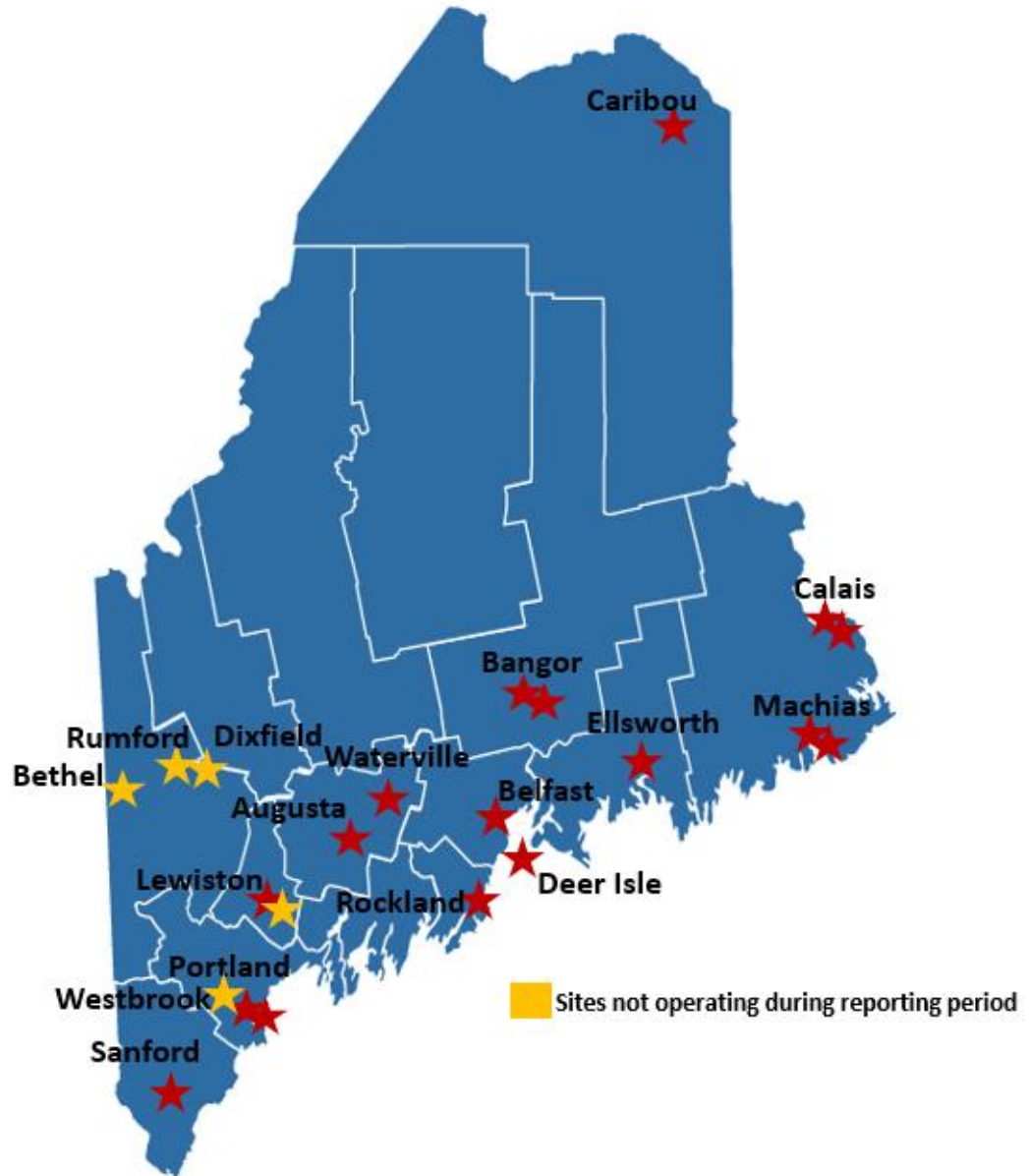
Syringe Service Programs Report for 2021; Reporting Period 11/1/2020 – 10/31/2021

Seven state certified SSPs operated 17 sites in Maine during this reporting period.

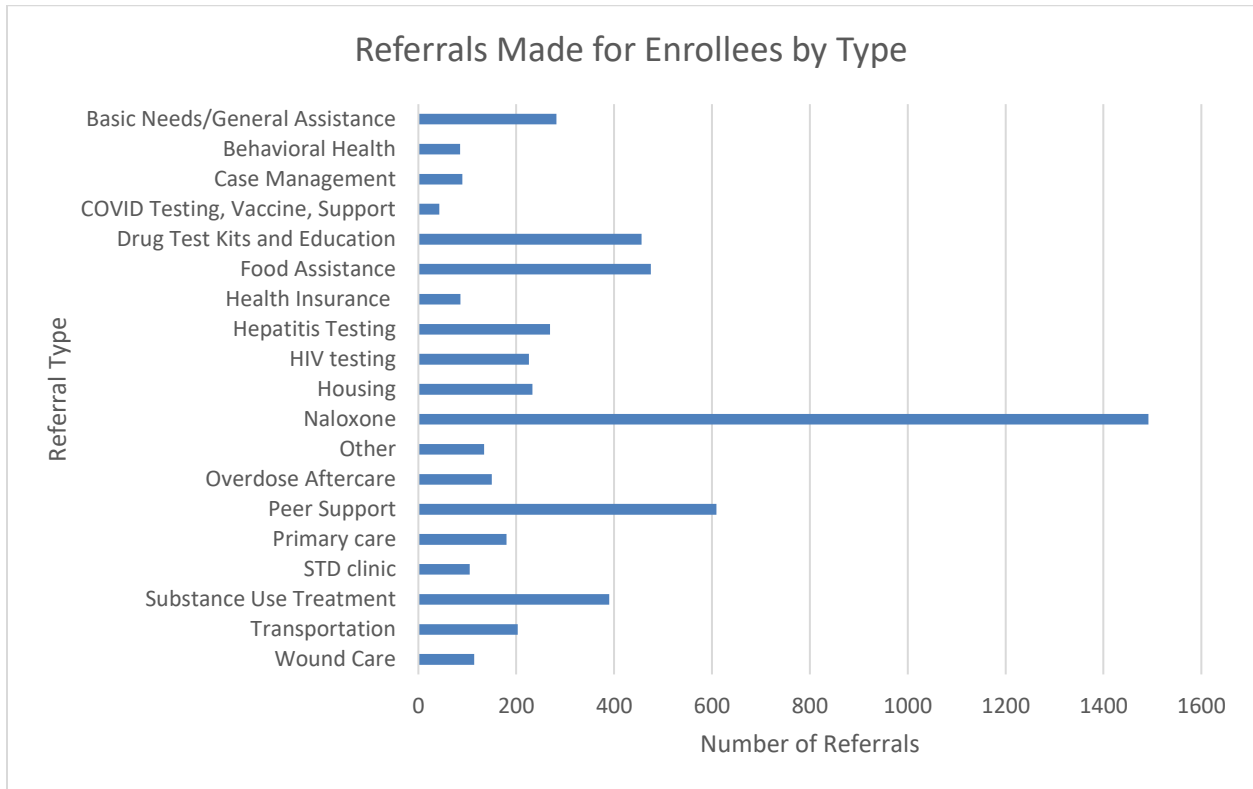
Agency	Site Location	Certification Date
Amistad	Portland	November 2020
Church of Safe Injection*	Bethel	September 2021
Church of Safe Injection*	Dixfield	September 2021
Church of Safe Injection*	Rumford	September 2021
Church of Safe Injection*	Lewiston	September 2021
Church of Safe Injection*	Westbrook	September 2021
City of Portland	Portland	September 1998
Health Equity Alliance	Ellsworth	July 2014
Health Equity Alliance	Bangor	July 2014
Health Equity Alliance	Machias	July 2014
Health Equity Alliance	Belfast	March 2019
Health Equity Alliance	Calais	February 2020
Health Equity Alliance	Rockland	February 2020
Health Equity Alliance	Deer Isle	February 2021
Health Reach Harm Reduction	Augusta	December 2004
Health Reach Harm Reduction	Waterville	February 2018
Maine Access Points	Sanford	February 2020
Maine Access Points	Calais	February 2020
Maine Access Points	Machias	March 2021
Maine Access Points	Caribou	February 2020
TriCounty Mental Health Services	Lewiston	March 2020
Wabanaki Public Health and Wellness	Bangor	February 2021

*The Church of Safe Injection was certified but did not being operations in within this reporting period

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

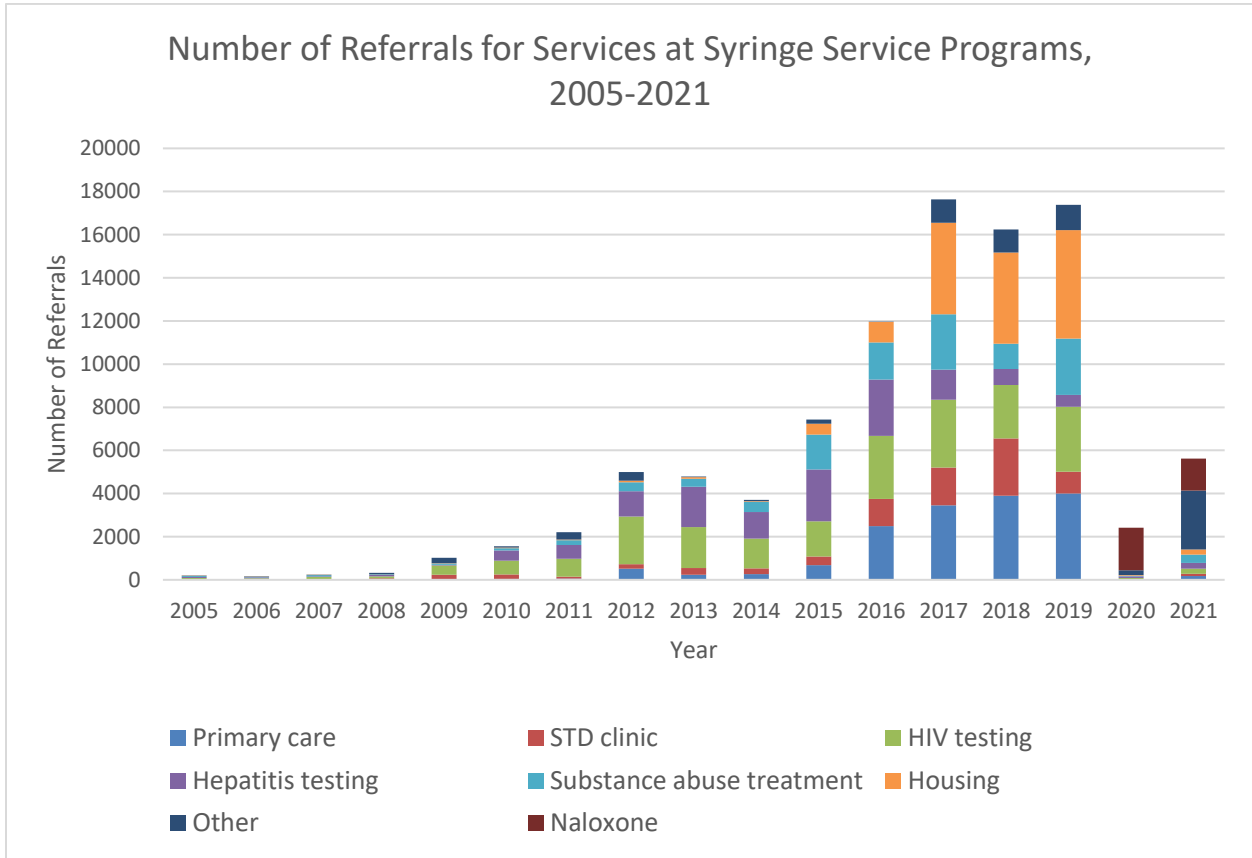


Graph 1.1 Referrals made for enrollees by type, 2021



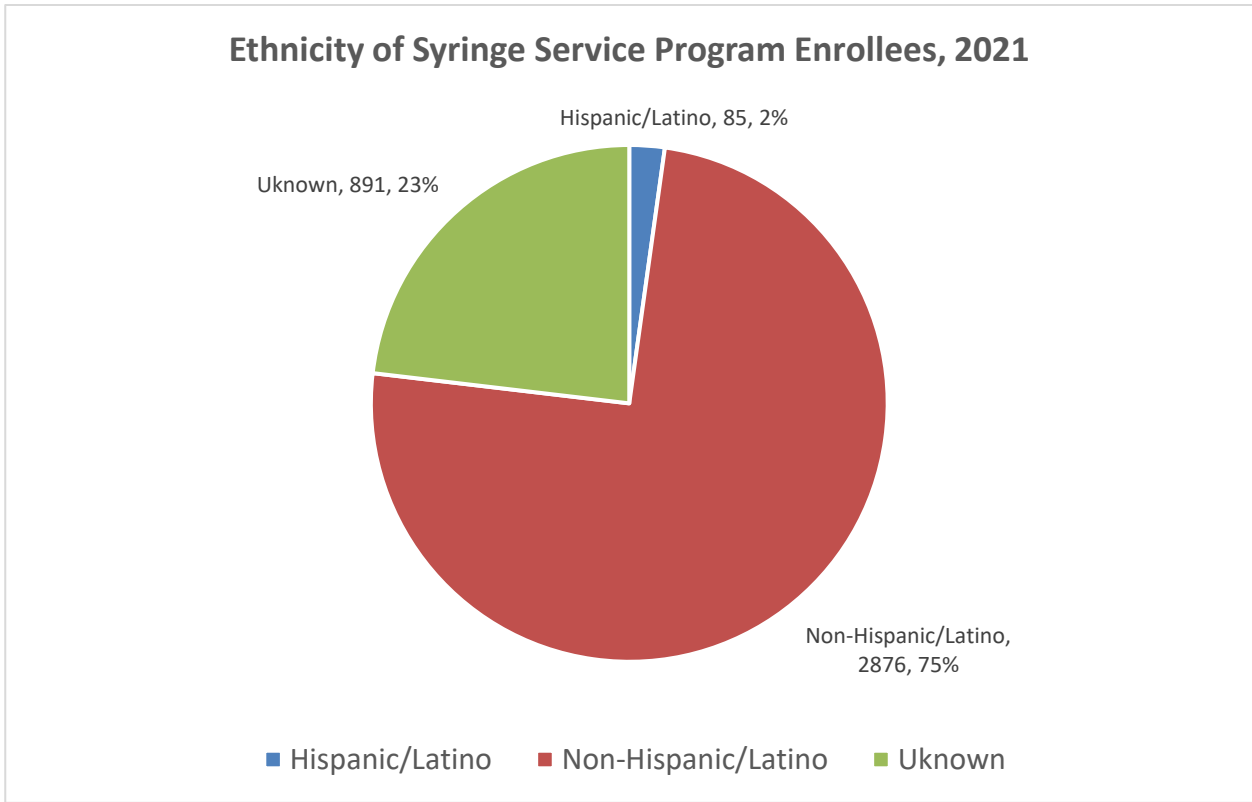
From 11/01/2020 to 10/31/2021, Syringe Service Program enrollees received 180 referrals for primary care, 105 referral for STD clinic services, 226 referrals for HIV testing, 269 referrals for hepatitis testing, 390 referrals for substance use disorder treatment, 233 referrals for housing, 609 referrals for peer support/recovery coaching, 150 for overdose aftercare, 475 for food assistance, 90 for case management, 85 for behavioral and mental health, 282 for basic needs and General Assistance, 456 for drug testing kits and education, 43 for COVID-19 testing, vaccine and support, 86 for health insurance enrollment, 203 for transformation assistance, and 232 other referrals. Other referrals includes: legal assistance, education support, financial education and assistance, intimate partner violence, community organizing, daycare/child supports among others. As noted previously, COVID-19 had a significant impact on services, including referrals, in 2021.

Graph 2.1 Referrals made for services at syringe service programs, 2005-2021



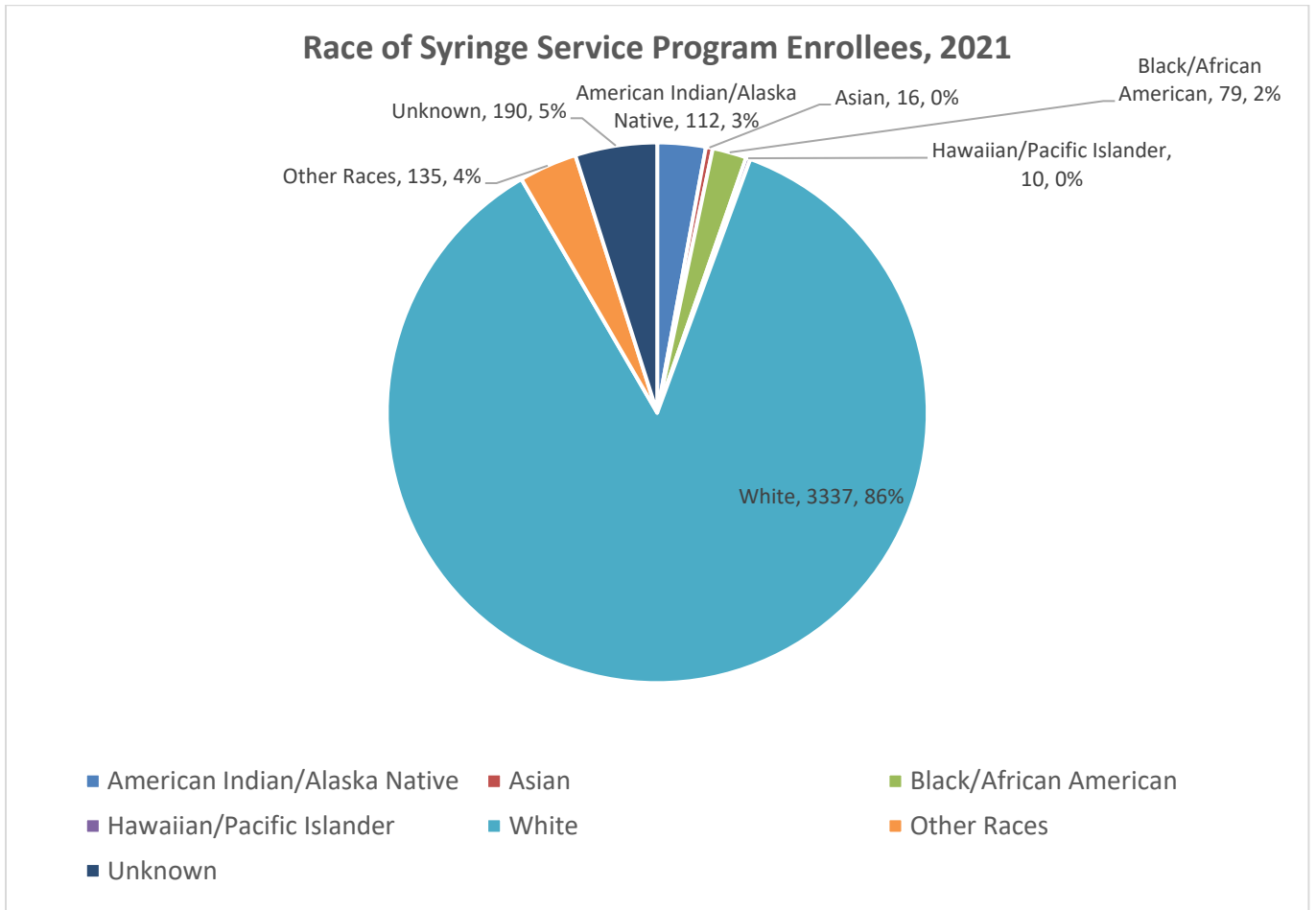
As noted previously, COVID-19 has a significant impact on services including referrals. However, the number of referrals has increased 132% in 2021 from 2020.

Graph 3.1 - 2021 Enrollee Demographics by Ethnicity



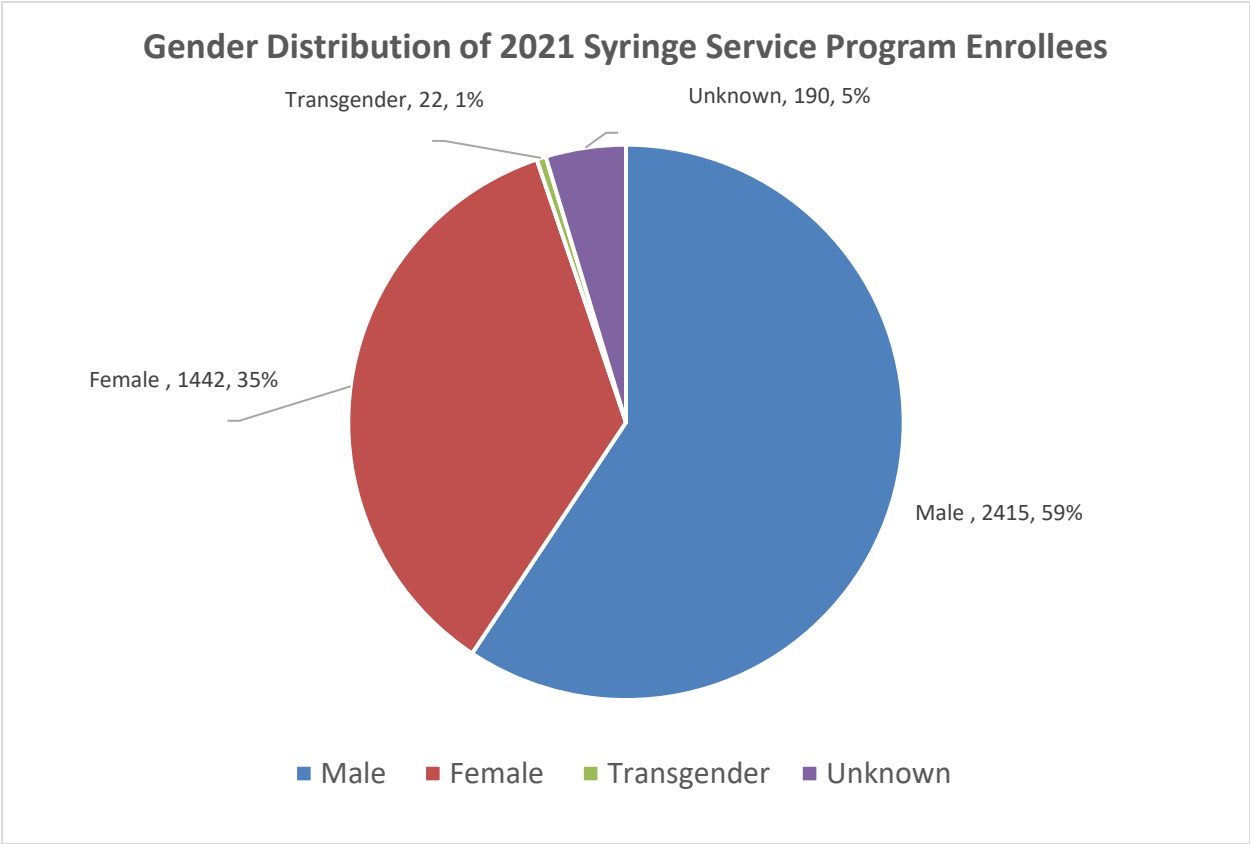
From 11/01/2020 to 10/31/2021 2% of program enrollees identified as Hispanic/Latino, which is slightly higher than the percent (1.8%) of Hispanic/Latino identified persons in Maine. **Note: enrollees can decline to provide demographic information.**

Graph 3.2 - 2021 Enrollee Demographics by Race



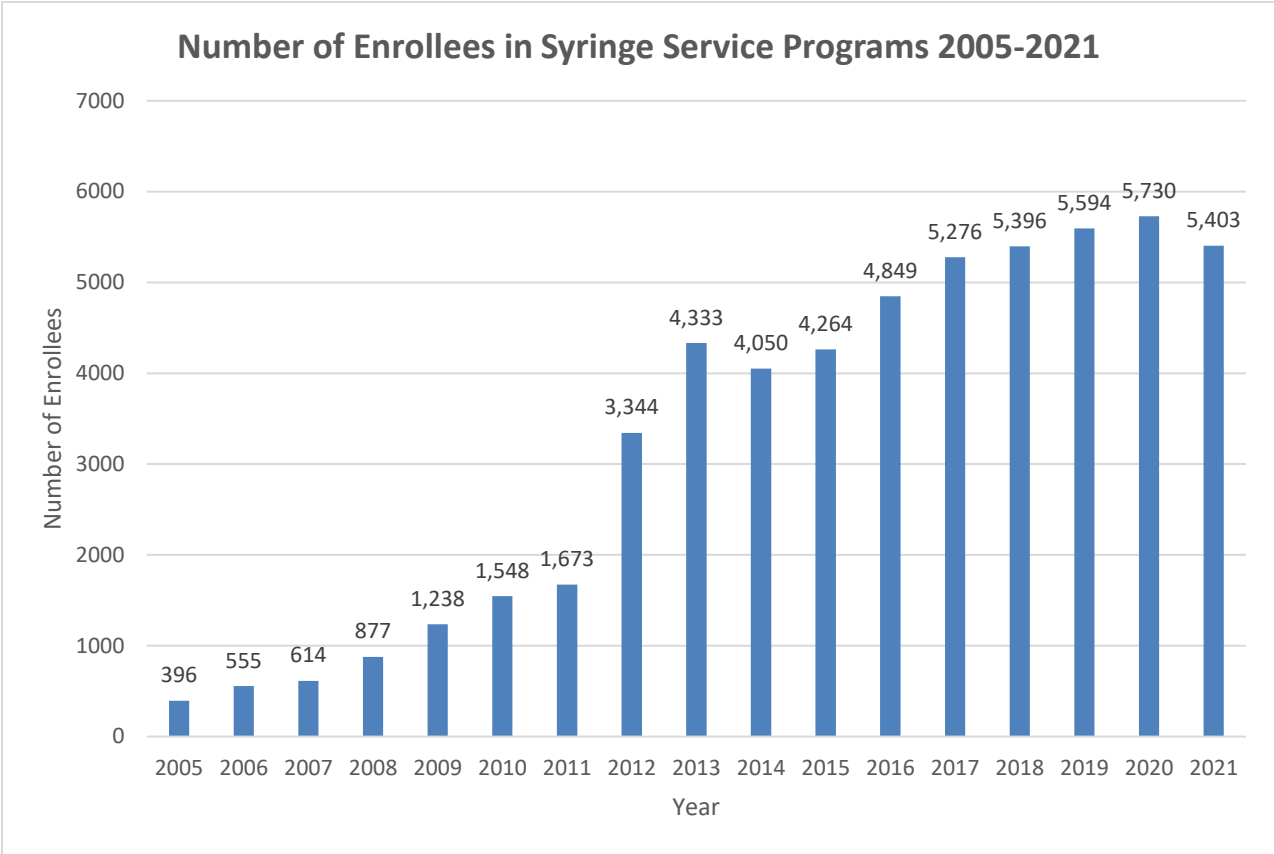
From 11/01/2020 to 10/31/2021, 112 (3%) of program enrollees identified as American Indian/Alaska Native, which is higher than the percent (.7%) of American Indian/Alaska Native identified persons in Maine. The percent of Black/African American persons is also slightly higher than the state percent (1.7%). **Note: enrollees can decline to provide demographics**

Graph 4.1 - Gender Distribution of 2021 Syringe Service Programs Enrollees



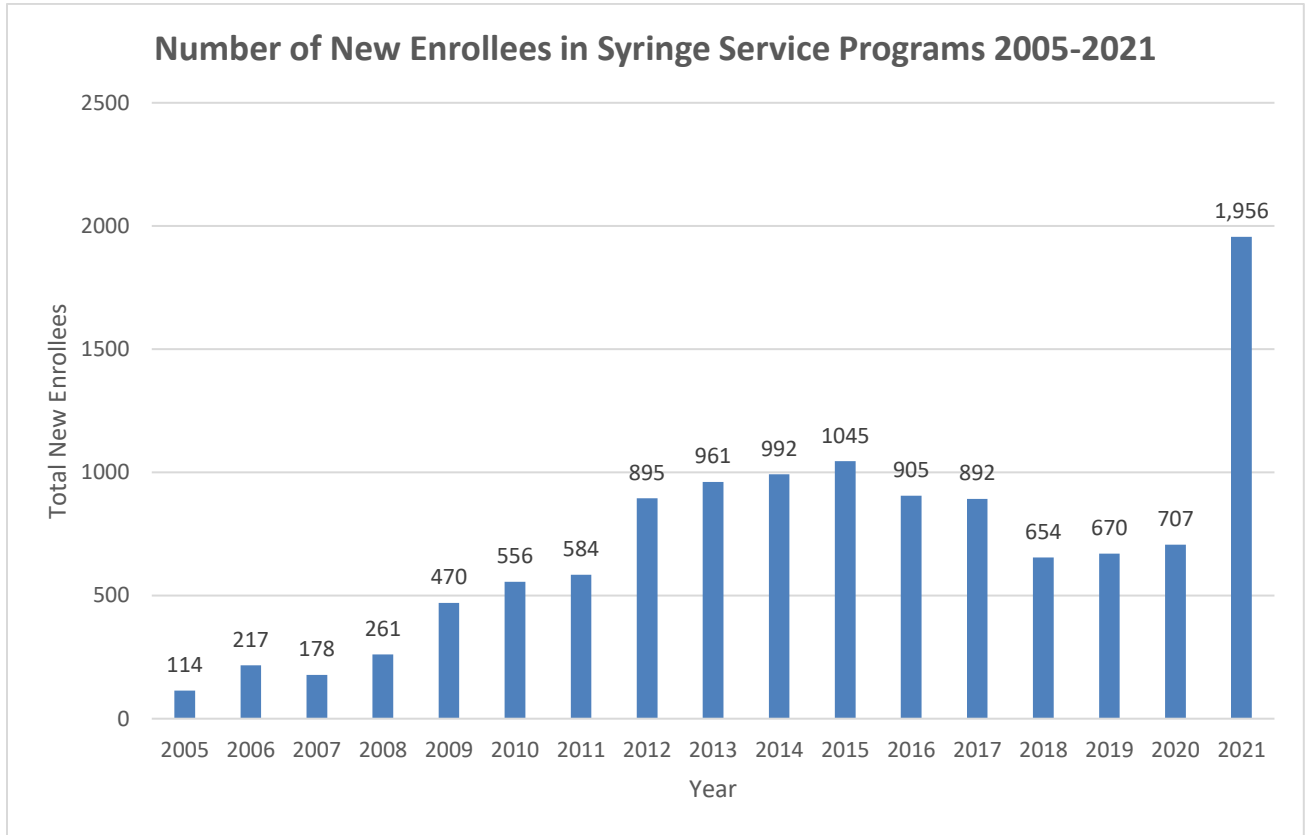
From 11/01/2020 to 10/31/2021, 59% of Syringe Service Program enrollees were male, 35% of enrollees were female, and 1% were transgender. **Note: enrollees can decline to provide demographics.**

Graph 5.1 - Total Number of Enrollees in Syringe Service Programs, 2005-2021



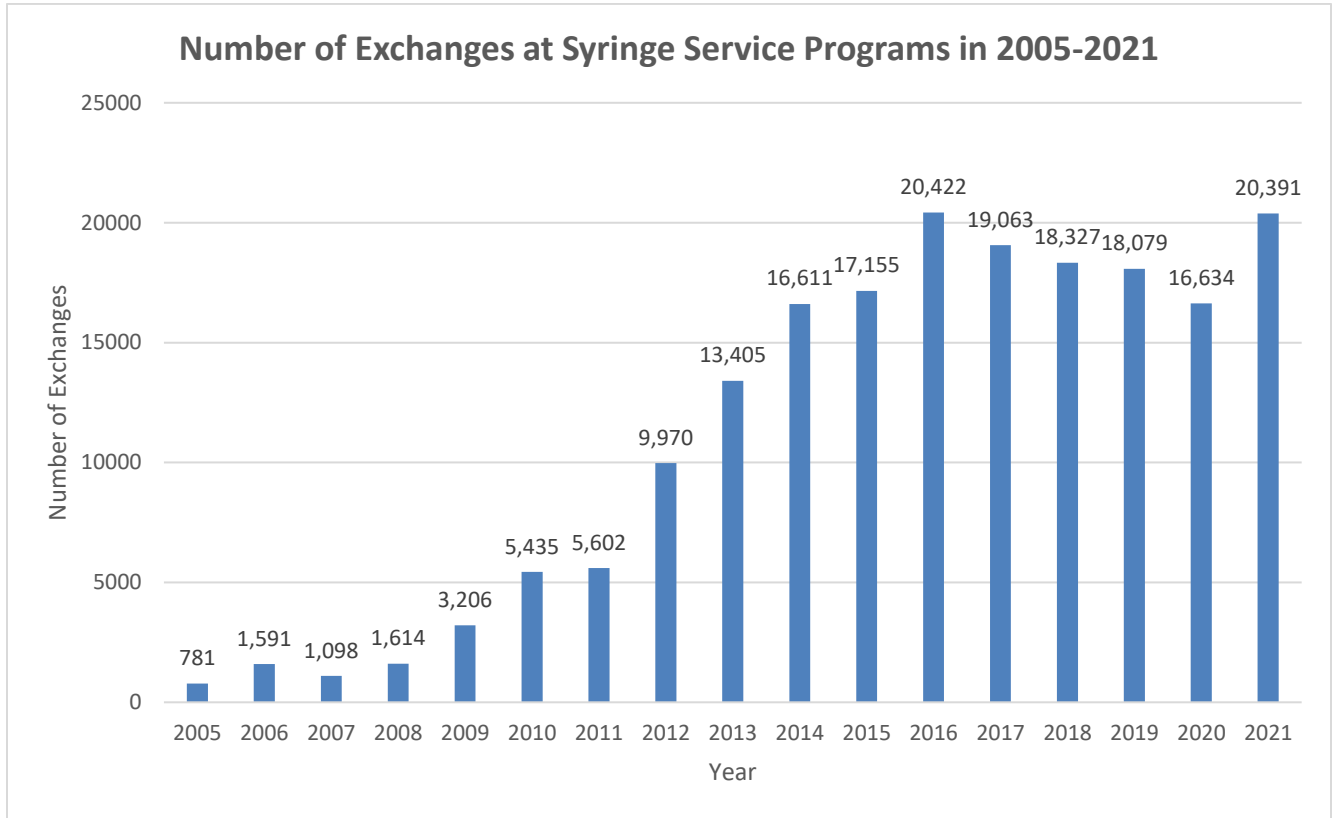
Graph 5.1 highlights the total number of enrollees in Syringe Service Programs since 2005. There was a decrease in the number of enrollees in 2021.

Graph 6.1 - New Enrollees in Syringe Service Programs, 2005-2021



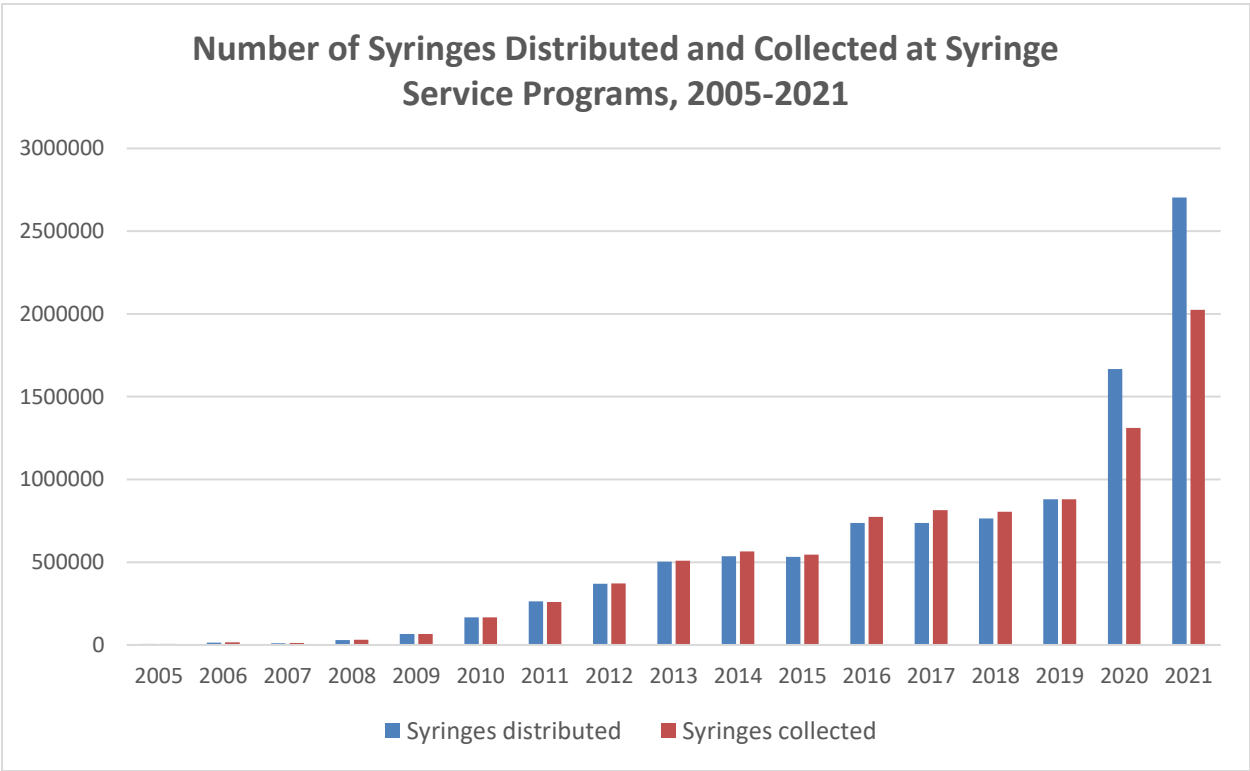
Graph 6.1 shows the total *new* enrollees in Syringe Service Programs since 2005. There was a continual increase in new enrollees from 2005 to 2015, followed by three years of decrease in new enrollees in 2016 to 2018. Since 2018, there has been an increase in new enrollees. 2021 saw the highest number of new enrollees and the highest increase of new enrollees, with a 178% increase.

Graph 7.1 - Total Number of Exchanges at Syringe Service Programs in 2005-2021



Graph 7.1 shows the number of exchanges (face-to-face or by mail interactions, not number of syringes) completed at Syringe Service Programs since 2005. Exchange events have increased from 2005 to 2016, followed by a decrease in events from 2017 to 2020. 2021 showed an increase in the number of exchanges at SSPs, the second highest number since data has been collected.

Graph 8.1 - Total Number of Syringes Distributed and Collected at Syringe Service Programs, 2005-2021.



Graph 8.1 highlights the increase in both the number of syringes distributed and collected since 2005. In 2021, there were 2,024,707 syringes collected and 2,703,080 syringes distributed.

Attachments

Attachment A; Amistad-Portland

Annual Report 11/1/2020-10/31/2021
Operator: Amistad
Location of Site: 835 Forest Ave, Portland, ME 04101
Established Date: March 16, 2021

Indicator	Quantity
Total enrolled	511
New enrollees, total	511
Number of HIV Tests conducted with new enrollees	
Total number of HIV Tests conducted with exchange consumers	
Number of syringes collected, total	73903
Number of syringes disposed, total	73903
Number of syringes distributed without exchange at enrollment	
Syringes distributed, total	137285
Number of initial exchange kits distributed	
Total exchanges	1827
Number of off-site exchanges	1813
Total referrals made	952
Total number of clients who receive a “starter kit”	

Number of Referrals Made	Quantity
Primary Care	29
STD clinic	12
HIV testing	13
Hepatitis Testing	25
Substance Abuse Treatment	73
Housing	50
Peer Support	139
Overdose Aftercare	5
Food Assistance	96
Case Management	8
Other: Mainecare Enrollment	86
Other: Medical/Mental Health provider	49
Other: General Assistance/Hotel	76
Other: Basic Needs (tents, clothes, outdoor supplies, etc.)	150
Other: transportation	126
Other: Legal supports	15
Total Referrals Made	952

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+
Hisp/Latino	5	23	2	8	0	0	0	0
Non-Hisp/Lat	57	167	31	76	0	0	2	3
TOTALS	62	190	33	84	0	0	2	3
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+
AI/AN	0	0	0	2	0	0	0	0
Asian	0	0	0	0	0	0	0	0
Blk/Af. Am	5	15	2	8	0	0	0	0
H/P.I.	0	8	0	0	0	0	0	0
White	57	167	31	74	0	0	2	3
Other races	0	0	0	0	0	0	0	0
TOTALS	62	190	33	84	0	0	2	3

Attachment B; City of Portland-Portland

Annual Report 11/1/2020-10/31/2021

Operator: Portland Public Health

On site exchanges: 103 India Street, Portland, ME (moved to 39 Forest Ave
11/16/21)

Outreach: Corner of Oxford and Elm Streets, Portland, ME

Established Date: 1993

Indicator	1/1-10/31/21	11/1-12/31/21
Total enrolled	1492	Unknown
New enrollees, total	313	Unknown
Number of HIV Tests conducted with new enrollees	Unknown	Unknown
Total number of HIV Tests conducted with exchange consumers	13	Unknown
Number of syringes collected, total	281311	46697
Number of syringes disposed, total	281311	46697
Number of syringes distributed without exchange at enrollment	50377	Unknown
Syringes distributed, total	327508	43136
Number of initial exchange kits distributed	222	Unknown
Total exchanges	4720	Unknown
Number of off-site exchanges	2099	Unknown
Total referrals made	777	Unknown
Total number of clients who receive a “starter kit”	222	Unknown

Number of Referrals Made	1/1-10/31/21	11/1-12/31/21
Primary Care	15	Unknown
STD clinic	80	Unknown
HIV and/or Hepatitis C testing	190	Unknown
Substance Abuse Treatment	24	Unknown
Housing	73	Unknown
Peer Support	0	Unknown
Overdose Aftercare	0	Unknown
Food Assistance	173	Unknown
Case Management	0	Unknown
Other: Patient Care Navigator	71	Unknown
Other: Personal care items	2	Unknown
Other: General Assistance	8	Unknown
Other: Naloxone distribution	141	Unknown
Other:	0	Unknown
Other:	0	Unknown
Total Referrals Made	777	Unknown

Enrollee Demographics 1/1-10/31/21 only*								
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+
Hisp/Latino	0	<5	0	0	0	0	0	0
Non-Hisp/Lat	0	<5	0	<5	0	0	0	0
Unknown	74	512	59	228	<5	<5	0	0
TOTALS	74	517	59	230	<5	<5	0	0
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+
AI/AN	0	<5	0	0	0	0	0	0
Asian	0	<5	<5	1	0	0	0	0
Blk/Af. Am	0	7	<5	10	0	0	0	0
H/P.I.	0	0	0	0	0	0	0	0
White	48	394	37	182	<5	<5	0	0
Other races	<5	<5	0	<5	0	0	0	0
Unknown	25	111	18	35	<5	0	0	0
TOTALS	74	517	59	230	<5	<5	0	0
*Demographic information was not collected for those who only received naloxone								

Attachment C; Tri-County-Lewiston

Annual Report 11/1/2020-10/31/2021
Operator: Tri-County Mental Health Services
Location of Site: Lewiston
Established Date: May 2020

Indicator	Quantity
Total enrolled	22
New enrollees, total	16
Number of HIV Tests conducted with new enrollees	0
Total number of HIV Tests conducted with exchange consumers	0
Number of syringes collected, total	15250
Number of syringes disposed, total	15250
Number of syringes distributed without exchange at enrollment	7270
Syringes distributed, total	22520
Number of initial exchange kits distributed	16
Total exchanges	85
Number of off-site exchanges	10
Total referrals made	26
Total number of clients who receive a “starter kit”	16

Number of Referrals Made	Quantity
Primary Care	
STD clinic	
HIV testing	
Hepatitis Testing	
Substance Abuse Treatment	16
Housing	
Peer Support	
Overdose Aftercare	
Food Assistance	
Case Management	10
Other:	
Other:	
Other:	
Other:	
Other:	
Other:	
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+
Hisp/Latino								
Non-Hisp/Lat								
TOTALS								
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+
AI/AN								
Asian								
Blk/Af. Am								
H/P.I.								
White	1	9	1	5				
Other races								
TOTALS	1	9	1	5	0	0	0	0

Attachment C; MaineGeneral Medical Center-Waterville

Annual Report 11/1/2020-10/31/2021
Operator: MaineGeneral Medical Center
Location of Site: Thayer Center for Health
149 North Street, Terrace Level, Waterville
Established Date: March 2018

Indicator	Quantity
Total enrolled	113
New enrollees, total	52
Number of HIV Tests conducted with new enrollees	0
Total number of HIV Tests conducted with exchange consumers	4
Number of syringes collected, total	72680
Number of syringes disposed, total	72680
Number of syringes distributed without exchange at enrollment	5278
Syringes distributed, total	89758
Number of initial exchange kits distributed	25
Total exchanges	246
Number of off-site exchanges	0
Total referrals made	133
Total number of clients who receive a “starter kit”	25

Number of Referrals Made	Quantity
Primary Care	27
STD clinic	0
HIV testing	0
Hepatitis Testing	2
Substance Abuse Treatment	17
Housing	10
Peer Support	9
Overdose Aftercare	0
Food Assistance	35
Case Management	0
Other: Dental	1
Other: Education	9
Other: Emergency Department	0
Other: Express Care	4
Other: MaineGeneral Financial Counseling	0
Other:Eye care	0
Other: Family Violence Project	0
Other: Resource Connection	15
Other: Patient Navigation	0
Other: Behavioral Health	3
Other: Transportation	1
Other: Outpatient Counseling	0
Total Referrals Made	133

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+
Hisp/Latino	0	3	0	0	0	0	0	0
Non-Hisp/Lat	10	36	5	26	0	0	0	0
TOTALS	10	39	5	26	0	0	0	0
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+
AI/AN	1	0	0	0	0			
Asian	1	0	0	0	0			
Blk/Af. Am	0	2	0	0	0			
H/P.I.	0	0	0	0	0			
White	8	42	7	26	0			
Other races	0	0	0	0	0			
TOTALS	10	44	7	26	0	0	0	0

Attachment D; MaineGeneral Medical Center-Augusta

Annual Report 11/1/2020-10/31/2021
Operator: MaineGeneral Medical Center
Location of Site: 9 Green Street, Augusta
Established Date: December 2004

Indicator	Quantity
Total enrolled	973
New enrollees, total	99
Number of HIV Tests conducted with new enrollees	2
Total number of HIV Tests conducted with exchange consumers	27
Number of syringes collected, total	282987
Number of syringes disposed, total	282987
Number of syringes distributed without exchange at enrollment	9520
Syringes distributed, total	316047
Number of initial exchange kits distributed	88
Total exchanges	1065
Number of off-site exchanges	0
Total referrals made	154
Total number of clients who receive a “starter kit”	88

Number of Referrals Made	Quantity
Primary Care	47
STD clinic	1
HIV testing	0
Hepatitis Testing	4
Substance Abuse Treatment	21
Housing	17
Peer Support	0
Overdose Aftercare	0
Food Assistance	46
Case Management	1
Other: Dental	5
Other: Education	1
Other: Emergency Department	2
Other: Express Care	1
Other: MaineGeneral Financial Counseling	2
Other:Eye care	1
Other: Family Violence Project	1
Other: Resource Connection	3
Other: Patient Navigation	0
Other: Behavioral Health	0
Other: Transportation	0
Other: Outpatient Counseling	1
Total Referrals Made	154

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+
Hisp/Latino	2	10	3	8			0	0
Non-Hisp/Lat	59	492	73	312			1	1
TOTALS	61	502	76	320	0	0	1	1
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+
AI/AN	1	24	1	16				
Asian	1	3	0	5				
Blk/Af. Am	1	2	0	1				
H/P.I.	0	0	0	0				
White	60	472	74	299			1	1
Other races	0	4	2	1				
TOTALS	63	505	77	322	0	0	1	1

Attachment E; Maine Access Points-Mail

Annual Report 11/1/2020-10/31/2021

Operator: Maine Access Points

Location of Site: Statewide Mail

Established Date: 2020

Indicator	Quantity
Total enrolled	289
New enrollees, total	171
Number of HIV Tests conducted with new enrollees	7
Total number of HIV Tests conducted with exchange consumers	19
Number of syringes collected, total	0
Number of syringes disposed, total	0
Number of syringes distributed without exchange at enrollment	0
Syringes distributed, total	268155
Number of initial exchange kits distributed	0
Total exchanges	621
Number of off-site exchanges	621
Total referrals made	626
Total number of clients who receive a “starter kit”	0

Number of Referrals Made	Quantity
Primary Care	12
STD clinic	2
HIV testing	5
Hepatitis Testing	22
Substance Abuse Treatment	41
Peer Support	92
Overdose Aftercare	81
Food Assistance	1
Other: Drug checking education and fentanyl test strips	169
Other: Overdose prevention education and naloxone distribution	185
Other: Wound care/ Health education	15
Other: Transportation	1
Total Referrals Made	626

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				
Non-Hispanic/Lat	2	21	8	13				
TOTALS	2	22	8	13	0	0	0	0
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+
AI/AN		1						
Asian								
Blk/Af. Am		3		1				
H/P.I.		1						
White	2	17	8	12				
Other races								
TOTALS	2	22	8	13	0	0	0	0

Attachment F; Maine Access Points-Caribou**Annual Report 11/1/2020-10/31/2021****Operator: Maine Access Points****Location of Site: Caribou****Established Date: 2021**

Indicator	Quantity
Total enrolled	144
New enrollees, total	101
Number of HIV Tests conducted with new enrollees	4
Total number of HIV Tests conducted with exchange consumers	7
Number of syringes collected, total	55367
Number of syringes disposed, total	55367
Number of syringes distributed without exchange at enrollment	0
Syringes distributed, total	155845
Number of initial exchange kits distributed	0
Total exchanges	487
Number of off-site exchanges	465
Total referrals made	572
Total number of clients who receive a “starter kit”	0

Number of Referrals Made	Quantity
Primary Care	5
STD clinic	0
HIV testing	3
Hepatitis Testing	1
Substance Abuse Treatment	9
Housing	16
Peer Support	103
Overdose Aftercare	9
Food Assistance	13
Other: Clothing services	6
Other: Community Organizing	9
Other: Mental health services	2
Other: Drug checking education and fentanyl test strips	117
Other: Overdose prevention education and naloxone distribution	216
Other: Legal assistance	0
Other: Education/ work	0
Other: Wound care/ Health education	40
Other: Transportation	22
Other: Intimate Partner Violence	1
Total Referrals Made	572

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+
Hisp/Latino	0	0						
Non-Hisp/Lat	18	38	14	29				
TOTALS	18	38	14	29	0	0	0	0
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+
AI/AN	1	3	1	1				
Asian				1				
Blk/Af. Am		2						
H/P.I.								
White	17	33	13	26				
Other races								
TOTALS	18	38	14	28	0	0	0	0

Attachment G; Maine Access Points-Sanford

Annual Report 11/1/2020-10/31/2021

Operator: Maine Access Points

Location of Site: Sanford

Established Date: 2020

Indicator	Quantity
Total enrolled	131
New enrollees, total	45
Number of HIV Tests conducted with new enrollees	3
Total number of HIV Tests conducted with exchange consumers	6
Number of syringes collected, total	232076
Number of syringes disposed, total	232076
Number of syringes distributed without exchange at enrollment	0
Syringes distributed, total	333131
Number of initial exchange kits distributed	0
Total exchanges	1264
Number of off-site exchanges	1256
Total referrals made	652
Total number of clients who receive a “starter kit”	0

Number of Referrals Made	Quantity
Primary Care	6
STD clinic	7
HIV testing	11
Hepatitis Testing	6
Substance Abuse Treatment	61
Housing	19
Peer Support	130
Overdose Aftercare	13
Food Assistance	29
Case Management	0
Other: Clothing services	25
Other: Community Organizing	14
Other: Mental health services	2
Other: Drug checking education and fentanyl test strips	80
Other: Overdose prevention education and naloxone distribution	154
Other: Legal assistance	8
Other: Education/ work	5
Other: Wound care/ Health education	48
Other: Transportation	32
Other: Intimate Partner Violence	2
Total Referrals Made	652

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				
Non-Hispanic/Lat	2	21	8	13				
TOTALS	2	22	8	13	0	0	0	0
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+
AI/AN		1						
Asian								
Blk/Af. Am		3		1				
H/P.I.		1						
White	2	17	8	12				
Other races								
TOTALS	2	22	8	13	0	0	0	0

Attachment H; Maine Access Points-Machias**Annual Report 11/1/2020-10/31/2021****Operator: Maine Access Points****Location of Site: Machias****Established Date: 2021**

Indicator	Quantity
Total enrolled	39
New enrollees, total	39
Number of HIV Tests conducted with new enrollees	0
Total number of HIV Tests conducted with exchange consumers	0
Number of syringes collected, total	10520
Number of syringes disposed, total	10520
Number of syringes distributed without exchange at enrollment	0
Syringes distributed, total	11900
Number of initial exchange kits distributed	0
Total exchanges	76
Number of off-site exchanges	34
Total referrals made	382
Total number of clients who receive a “starter kit”	0

Number of Referrals Made	Quantity
Primary Care	15
STD clinic	1
HIV testing	1
Hepatitis Testing	7
Substance Abuse Treatment	63
Housing	25
Peer Support	67
Overdose Aftercare	18
Food Assistance	11
Other: Clothing services	3
Other: Community Organizing	7
Other: Mental health services	12
Other: Drug checking education and fentanyl test strips	39
Other: Overdose prevention education and naloxone distribution	59
Other: Legal assistance	5
Other: Education/ work	2
Other: Wound care/ Health education	8
Other: COVID-testing/ vaccine	12
Other: COVID Rental Assistance	15
Other: Pet supports/ clinic	2
Other: Transportation	9
Other: Intimate Partner Violence	1
Total Referrals Made	382

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+
Hisp/Latino								
Non-Hisp/Lat								
TOTALS	0	0	0	0	0	0	0	0
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+
AI/AN								
Asian								
Blk/Af. Am								
H/P.I.								
White								
Other races								
TOTALS	0	0	0	0	0	0	0	0

Attachment I; Maine Access Points-Calais**Annual Report 11/1/2020-10/31/2021****Operator: Maine Access Points****Location of Site: Calais****Established Date: 2020**

Indicator	Quantity
Total enrolled	63
New enrollees, total	27
Number of HIV Tests conducted with new enrollees	0
Total number of HIV Tests conducted with exchange consumers	0
Number of syringes collected, total	174000
Number of syringes disposed, total	174000
Number of syringes distributed without exchange at enrollment	0
Syringes distributed, total	32800
Number of initial exchange kits distributed	0
Total exchanges	156
Number of off-site exchanges	156
Total referrals made	412
Total number of clients who receive a “starter kit”	0

Number of Referrals Made	Quantity
Primary Care	10
STD clinic	2
HIV testing	0
Hepatitis Testing	9
Substance Abuse Treatment	62
Housing	22
Peer Support	69
Overdose Aftercare	24
Food Assistance	15
Other: Clothing services	12
Other: Community Organizing	16
Other: Mental health services	16
Other: Drug checking education and fentanyl test strips	51
Other: Overdose prevention education and naloxone distribution	57
Other: Legal assistance	3
Other: Education/ work	10
Other: Wound care/ Health education	3
Other: COVID-testing/ vaccine	6
Other: COVID Rental Assistance	10
Other: Daycare & child mental health supports	3
Other: Transportation	12
Other: Intimate Partner Violence	0
Total Referrals Made	412

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+
Hisp/Latino								
Non-Hisp/Lat	2	14	4	9	0	0	0	0
TOTALS	2	14	4	9	0	0	0	0
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+
AI/AN		1	1	1				
Asian								
Blk/Af. Am								
H/P.I.								
White	2	11	3	5				
Other races								
TOTALS	2	12	4	6	0	0	0	0

Attachment J; Health Equity Alliance-Bangor

Annual Report 11/1/2020-10/31/2021

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	1236
New enrollees, total	497
Number of HIV Tests conducted with new enrollees	0
Total number of HIV Tests conducted with exchange consumers	0
Number of syringes collected, total	617841
Number of syringes disposed, total	617841
Number of syringes distributed without exchange at enrollment	1370
Syringes distributed, total	793836
Number of initial exchange kits distributed	137
Total exchanges	7553
Number of off-site exchanges	67
Total referrals made	604
Total number of clients who receive a “starter kit”	137

Number of Referrals Made	Quantity
Primary Care	0
STD clinic	0
HIV testing	1
Hepatitis Testing	1
Substance Abuse Treatment	2
Housing	1
Peer Support	0
Overdose Aftercare	0
Food Assistance	56
Case Management	0
Other: Substance Use Education/Naloxone	543
Other:	
Other:	
Other:	
Other:	
Total Referrals Made	604

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	6	4	1	4				1
Non-Hispanic/Lat	209	392	137	237	0	4	3	1
TOTALS	215	396	138	241	0	4	3	2
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+
AI/AN	8	13	11	17		0	0	0
Asian	1	0	0	0		0	0	0
Blk/Af. Am	3	6	1	2		0	0	0
H/P.I.	0	0	0	0		0	0	0
White	179	336	118	197		4	2	1
Other races	24	41	8	27		0	1	1
TOTALS	215	396	138	241	0	4	3	2

Attachment K; Health Equity Alliance-Ellsworth**Annual Report 11/1/2020-10/31/2021****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	327
New enrollees, total	71
Number of HIV Tests conducted with new enrollees	0
Total number of HIV Tests conducted with exchange consumers	0
Number of syringes collected, total	148770
Number of syringes disposed, total	148770
Number of syringes distributed without exchange at enrollment	1620
Syringes distributed, total	153565
Number of initial exchange kits distributed	162
Total exchanges	2172
Number of off-site exchanges	0
Total referrals made	86
Total number of clients who receive a “starter kit”	162

Number of Referrals Made	Quantity
Primary Care	0
STD clinic	0
HIV testing	0
Hepatitis Testing	0
Substance Abuse Treatment	0
Housing	0
Peer Support	0
Overdose Aftercare	0
Food Assistance	0
Case Management	0
Other: Substance Use Education/Naloxone	86
Other:	0
Other:	0
Other:	0
Other:	0
Other:	0
Total Referrals Made	86

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+
Hisp/Latino	0	1	0	0	0	0	0	0
Non-Hisp/Lat	46	130	25	72	0	1	0	2
TOTALS	46	131	25	72	0	1	0	2
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+
AI/AN	0	2	0	1		0		0
Asian	0	1	0	0		0		0
Blk/Af. Am	0	1	0	0		0		0
H/P.I.	0	0	0	0		0		0
White	44	120	24	67		1		2
Other races	2	7	1	4		0		0
Uknown data	46	131	25	72	0	1	0	2
TOTALS	92	262	50	144	0	2	0	4

Attachment L; Health Equity Alliance-Machias

Annual Report 11/1/2020-10/31/2021

Operator: Down East AIDS Network/Health Equity Alliance

Location of Site: 7 VIP Drive, Machias, ME 04654

Established Date: 2014

Indicator	Quantity
Total enrolled	36
New enrollees, total	4
Number of HIV Tests conducted with new enrollees	0
Total number of HIV Tests conducted with exchange consumers	0
Number of syringes collected, total	9535
Number of syringes disposed, total	9535
Number of syringes distributed without exchange at enrollment	40
Syringes distributed, total	11500
Number of initial exchange kits distributed	4
Total exchanges	74
Number of off-site exchanges	0
Total referrals made	43
Total number of clients who receive a “starter kit”	4

Number of Referrals Made	Quantity
Primary Care	0
STD clinic	0
HIV testing	0
Hepatitis Testing	0
Substance Abuse Treatment	0
Housing	0
Peer Support	0
Overdose Aftercare	0
Food Assistance	0
Case Management	0
Other: Substance Use Education/Naloxone	43
Other:	0
Other:	0
Other:	0
Other:	0
Other:	0
Total Referrals Made	43

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/Lat	6	16	5	9	0	0	0	0
TOTALS	6	16	5	9	0	0	0	0
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+
AI/AN								
Asian								
Blk/Af. Am								
H/P.I.								
White	5	14	3	8				
Other races	1	2	2	1				
TOTALS	6	16	5	9	0	0	0	0

Attachment M; Health Equity Alliance-Calais

Annual Report 11/1/2020-10/31/2021

Operator: Down East AIDS Network/Health Equity Alliance

Location of Site: 10 Barket Street, Calais, ME 04619

Established Date: 2020

Indicator	Quantity
Total enrolled	15
New enrollees, total	0
Number of HIV Tests conducted with new enrollees	0
Total number of HIV Tests conducted with exchange consumers	0
Number of syringes collected, total	2500
Number of syringes disposed, total	2500
Number of syringes distributed without exchange at enrollment	0
Syringes distributed, total	3000
Number of initial exchange kits distributed	0
Total exchanges	6
Number of off-site exchanges	0
Total referrals made	0
Total number of clients who receive a “starter kit”	0

Number of Referrals Made	Quantity
Primary Care	0
STD clinic	0
HIV testing	0
Hepatitis Testing	0
Substance Abuse Treatment	0
Housing	0
Peer Support	0
Overdose Aftercare	0
Food Assistance	0
Case Management	0
Other:	0
Other:	0
Other:	0
Other:	0
Other:	0
Other:	0
Total Referrals Made	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+
Hisp/Latino	0	0	0	0	0	0	0	0
Non-Hisp/Lat	0	0	0	0	0	0	0	0
Unknown	2	6	2	5	0	0	0	0
TOTALS	2	6	2	5	0	0	0	0
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+
AI/AN	0	1	0	0				
Asian	0	0	0	0				
Blk/Af. Am	0	0	0	0				
H/P.I.	0	0	0	0				
White	2	5	2	5				
Other races	0	0	0	0				
TOTALS	2	6	2	5	0	0	0	0

Attachment N; Health Equity Alliance- Rockland

Annual Report 11/1/2020-10/31/2021

Operator: Down East AIDS Network/Health Equity Alliance

Location of Site: 11 White Street, Rockland, ME 04841

Established Date: 2020

***Note due to staffing and location changes there is insufficient data to report**

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

Number of Referrals Made	Quantity
Primary Care	0
STD clinic	0
HIV testing	0
Hepatitis Testing	0
Substance Abuse Treatment	0
Housing	0
Peer Support	0
Overdose Aftercare	0
Food Assistance	0
Case Management	0
Other:	0
Other:	0
Other:	0
Other:	0
Other:	0
Other:	0
Total Referrals Made	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+
Hisp/Latino								
Non-Hisp/Lat								
TOTALS	0	0	0	0	0	0	0	0
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+
AI/AN								
Asian								
Blk/Af. Am								
H/P.I.								
White								
Other races								
TOTALS								

Attachment O; Health Equity Alliance-Belfast

Annual Report 11/1/2020-10/31/2021

Operator: Down East AIDS Network/Health Equity Alliance

Location of Site: 147 Waldo Avenue, Belfast, ME 04915

Established Date: 2019

Indicator	Quantity
Total enrolled	7
New enrollees, total	5
Number of HIV Tests conducted with new enrollees	0
Total number of HIV Tests conducted with exchange consumers	0
Number of syringes collected, total	1140
Number of syringes disposed, total	1140
Number of syringes distributed without exchange at enrollment	0
Syringes distributed, total	2574
Number of initial exchange kits distributed	0
Total exchanges	23
Number of off-site exchanges	0
Total referrals made	5
Total number of clients who receive a “starter kit”	0

Number of Referrals Made	Quantity
Primary Care	0
STD clinic	0
HIV testing	0
Hepatitis Testing	0
Substance Abuse Treatment	0
Housing	0
Peer Support	0
Overdose Aftercare	0
Food Assistance	0
Case Management	0
Other: Substance Use Education/Naloxone	5
Other:	0
Other:	0
Other:	0
Other:	0
Other:	0
Total Referrals Made	5

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+
Hisp/Latino	0	0	0	0				
Non-Hisp/Lat	2	2	1	2				
TOTALS	2	2	1	2	0	0	0	0
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+
AI/AN	0	0	0	0				
Asian	0	0	0	0				
Blk/Af. Am	0	0	0	0				
H/P.I.	0	0	0	0				
White	2	2	1	2				
Other races	0	0	0	0				
TOTALS	2	2	1	2	0	0	0	0

Attachment P; Health Equity Alliance-Deer Isle

Annual Report 11/1/2020-10/31/2021

Operator: Downeast AIDS Network/Health Equity Alliance
Location of Site: 627 N. Deer Isle Road, Deer Isle, ME 04627
Established Date: 2021

Indicator	Quantity
Total enrolled	3
New enrollees, total	3
Number of HIV Tests conducted with new enrollees	0
Total number of HIV Tests conducted with exchange consumers	0
Number of syringes collected, total	130
Number of syringes disposed, total	130
Number of syringes distributed without exchange at enrollment	140
Syringes distributed, total	520
Number of initial exchange kits distributed	3
Total exchanges	16
Number of off-site exchanges	0
Total referrals made	3
Total number of clients who receive a “starter kit”	3

Number of Referrals Made	Quantity
Primary Care	0
STD clinic	0
HIV testing	0
Hepatitis Testing	0
Substance Abuse Treatment	0
Housing	0
Peer Support	0
Overdose Aftercare	0
Food Assistance	0
Case Management	0
Other: Substance Use Education/Naloxone	3
Other:	0
Other:	0
Other:	0
Other:	0
Other:	0
Total Referrals Made	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+
Hisp/Latino	0							
Non-Hisp/Lat	0							
TOTALS	0	0	0	0	0	0	0	0
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+
AI/AN	0							
Asian	0							
Blk/Af. Am	0							
H/P.I.	0							
White	0							
Other races	0							
TOTALS	0	0	0	0	0	0	0	0

Attachment Q; Wabanaki Public Health and Wellness-Bangor

Annual Report 11/1/2020-10/31/2021
Operator: Wabanaki Public Health and Wellness
Location of Site: 157 Park Street 32A Bangor,ME
Established Date: 2021

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

Number of Referrals Made	Quantity
Primary Care	0
STD clinic	0
HIV testing	2
Hepatitis Testing	2
Substance Abuse Treatment	1
Housing	0
Peer Support	0
Overdose Aftercare	0
Food Assistance	0
Case Management	0
Other:	0
Other:	0
Other:	0
Other:	0
Other:	0
Other:	0
Total Referrals Made	5

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								
Non-Hispanic/Lat				2				
TOTALS	0	0	0	2	0	0	0	0
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+
AI/AN				2				
Asian								
Blk/Af. Am								
H/P.I.								
White								
Other races								
TOTALS	0	0	0	2	0	0	0	0

Sources:

Bennett AS, Bell A, Tomedi L, Hulseley 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.

Centers for Disease Control and Prevention. HIV and Injection Drug Use, [HIV and Injection Drug Use – Vital Signs – CDC. Centers for Disease Control and Prevention](#). Published December 2016.

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

Centers for Disease Control and Prevention, Hepatitis Kills More Americans Than Any Other Infectious Disease, Press release, May 4, 2016 <http://www.cdc.gov/media/releases/2016/p0504-hepc-mortality.html>

Centers for Disease Control and Prevention, <https://www.cdc.gov/hepatitis>

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.

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.

Fernandes RM, Cary M, Duarte G, et al. Effectiveness of needle and syringe programmes in people who inject drugs – An overview of systematic reviews. *BMC Public Health*. 2017;17(1):309. doi:10.1186/s12889-017-4210-2.

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.

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>

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.

Michelle M Van Handel, MPH, Charles E Rose, PhD, Elaine J Hallisey, MA, Jessica L Kolling, MPH, Jon E Zibbell, PhD, Brian Lewis, BS, Michele K Bohm, MPH, Christopher M Jones, PharmD, MPH, Barry E Flanagan, PhD, Azfar-E-Alam Siddiqi, MD, PhD, Kashif Iqbal, MPH, Andrew L Dent, MA, MBA, Jonathan H Mermin, MD, MPH, Eugene McCray, MD, John W Ward, MD, and John T Brooks, MD, “County-level Vulnerability Assessment for Rapid Dissemination of HIV or HCV Infections among Persons who Inject Drugs, United States,” *JAIDS Journal of Acquired Immune Deficiency Syndromes*, November 1, 2016, 73(3):323–331.

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.

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.

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.

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.