

## What are Syringe Services Programs?

**Syringe Services Programs (SSPs)** are an effective public health approach to reducing the spread of HIV/AIDS and other blood-borne diseases in communities across the U.S. Services include the provision of clean syringes, collect used syringes, harm reduction education, HIV and Hepatitis C testing/screening, Overdose Prevention (OD) Education, and referrals to drug treatment, STD screening, and other ancillary services.

## Reporting Requirements

As required by **Conn. Gen. Stat. § 19a-124 (2017)**, The department shall require programs to include an annual evaluation component to monitor (1) the number of syringes distributed and collected, (2) program participation rates, (3) the number of participants who are referred to treatment, and (4) the incidence of human immunodeficiency virus from injection drug use to determine if there is a reduction in the result of the syringe services program.

The annual report required sites to document the following data points.

### Demographic:

- Gender of participants
- Race/Ethnicity
- County of residence
- Primary substance used

### Services:

- Number of SSP participants
- Number of new participants enrolled
- Number of syringes distributed and collected
- Number of persons HIV/HCV tested
- Number of Naloxone kits distributed
- Number of persons referred to treatment services

## How Do SSPs Benefit Communities and Public Safety?

- **SSPs Increase Entry into Substance Use Disorder Treatment: SSPs reduce drug use.**  
People who inject drugs (PWID) are 5 times as likely to enter treatment for substance use disorder and more likely to reduce or stop injecting when they use an SSP.
- **SSPs Reduce Needlestick Injuries: SSPs reduce needlestick injuries** among first responders by providing proper disposal. One in three officers may be stuck with a needle during their career. Increasing safe disposal also protects the public from needlestick injuries. SSPs do not increase local crime in the areas where they are located.
- **SSPs Reduce Overdose Deaths: SSPs reduce overdose deaths** by teaching PWID how to prevent and respond to drug overdose. They also learn how to use naloxone, a medication used to reverse overdose.
- **SSPs reduce new HIV and viral hepatitis infections: SSPs reduce new HIV and viral hepatitis infections by decreasing the sharing of syringes** and other injection equipment.
- **Prevention Saves Money:** SSPs save health care dollars by preventing infections. The estimated lifetime cost of treating one person living with HIV is more than \$400,000. Testing linked to hepatitis C treatment can save an estimated 320,000 lives



Scan this QR Code for more  
information related to SSPs  
in Connecticut.

## Annual Report

January 1, 2021 – December 31, 2021

### 11 SSPs in Connecticut

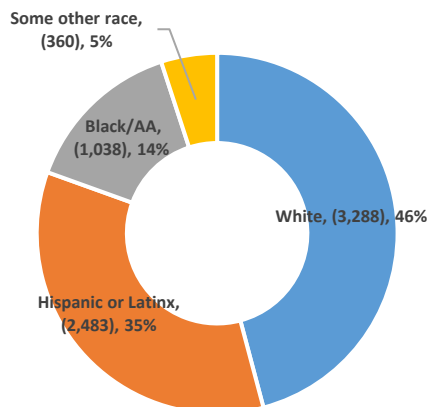
- ACT (Hartford)
- APEX (Danbury)
- Alliance for Living (New London)
- GBAPP (Bridgeport)
- Connecticut Harm Reduction Alliance (Hartford)
- Perceptions Programs, Inc. (Windham)
- Yale University CHCV (New Haven)
- Liberations Programs (Bridgeport)
- Mid-Fairfield AIDS Proj. (Norwalk)
- StamfordCARES (Stamford)
- Waterbury Health Department (Waterbury)

**7,169** individuals were served during the reporting period. These individuals generated **40,305** visits to the SSPs. **3,893** (54%) were new SSPs clients.

### Demographic Information

The 7,169 individuals who received services were from all the counties in Connecticut. The percentage of participants by county were Hartford (55%), New Haven (20%), Fairfield (13%), New London (5%), Middlesex (3%), Windham (2%), Litchfield (1.6%) and Tolland (<1%).

**69%** of individuals served identified as a male, **29%** identified as female, **2%** as some other gender and **<1%** as transgender. **41** years old was the median age (age range 17 - 77). Below is a chart that shows the breakdown of self-reported race/ethnicity.



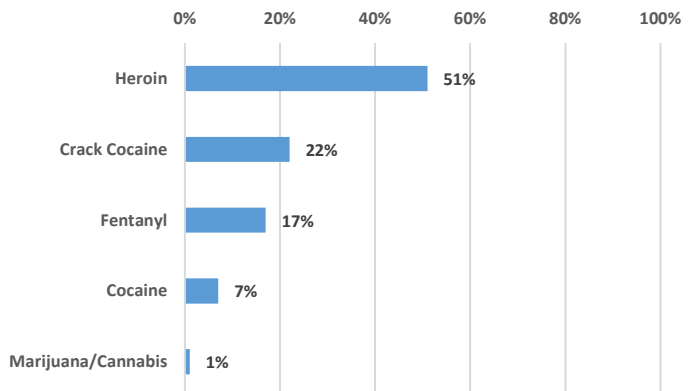
### Services Information

- There were **1,529** individuals tested for HIV, and **1,486** tested for Hep C.
- **18,049** 'Safe Crack Kits,' and **61,274** condoms were distributed
- **128** individuals requested and received referral to substance abuse treatment services.

During the reporting period, there were **2,220,401** syringes distributed and **1,526,936** collected.

**69%** of distributed syringes were returned during this period.

Information collected on the substances reported by participants at the time of enrollment are described below. Heroin was the primary substance reported with **51%** (1,954/3,810) of participants indicating use.



SSPs distributed **5,856** overdose prevention kits (11,712 doses) to participants and **986** of those kits were used to reverse an overdose.

In order to reduce the risk of overdose among participants, SSPs distributed **16,207** fentanyl testing strips.

### SSP Statewide Impact

In 2020, **10** newly diagnosed HIV cases in Connecticut were among people who inject drugs (PWIDs). From 2019 to 2020, HIV diagnoses decreased **28%** among PWIDs (from 2019 [n=14] to 2020 [n=10]).