# Fiscal quarter 3 2022 Syringe services report



Quarter 3: 01/01/2022-03/31/2022

Syringe service metrics are calculated to determine the reach of program services. Seven syringe service providers (SSPs) exchanged syringes with clients from January 1, 2022 to March 31, 2022: Utah Harm Reduction Coalition, Salt Lake Harm Reduction Project (formerly One Voice Recovery), Utah Naloxone, Soap 2 Hope, Southeast Utah Health Department, Martindale Clinic, Beyond Addiction Mosaic, and Hand in Hand.

Table 1. Syringe service Pprogram metrics

Metric	January	February	March	Q3 total
Syringes in	66,369	55,345	80,202	371,444 <sup>†</sup>
Syringes disposed elsewhere*	1,782	1,390	1,423	5,695 <sup>†</sup>
Syringes out	68,122	57,440	82,860	434,392 <sup>†</sup>
Return ratio**	1.03	1.04	1.03	1.17
Return ratio (with disposed)	1.00	1.01	1.02	1.15
Total unique clients served	612	488	572	1,284
Total encounters	838	649	857	6,058 <sup>†</sup>
New participants	172	101	176	449 <sup>†</sup>

\*Self-reported proper disposal

\*\*"Return ratio" is syringes out divided by syringes in

<sup>†</sup>Quarterly totals that include Soap 2 Hope and Utah Naloxone data

As indicated in the table above, data provided by Soap 2 Hope and Utah Naloxone is only represented in the quarterly totals. Soap 2 Hope and Utah Naloxone do not gather client-level data.

The return ratio syringe metric is calculated by dividing the number of syringes distributed out, by the number of used syringes collected. This ratio is calculated with the number of syringes turned in directly to syringe service providers, and combined with the number of syringes people reported they properly disposed of elsewhere.

During this time period, the return ratio varied by month, but averaged to 1.17 over the quarter. Or for every 1.2 syringes distributed, SSPs received one back at an exchange event.

Table 2. Naloxone provided by SSPs

Naloxone	January	February	March	Q3 Totals
Doses distributed	225	275	394	894
Reversals reported	12	7	16	35

At each SSP encounter, participants are asked whether they received an overdose reversal with naloxone, or if they performed a reversal for someone else in the time since their last visit. It is possible a participant could report more than one reversal per month, or per encounter. Participants may decline to answer this question.

Reversals are defined as survival of an individual when one or more naloxone doses were administered in a suspected overdose event. Additional naloxone purchased by Utah Naloxone and distributed by syringe service providers is not included in doses distributed.



### Table 3. Gender reported by clients

Gender	Q3(%)	Q3(N)
Male	61.4%	721
Female	37.6%	442
Trans/nonconforming	0.3%	3
Declined	0.8%	9

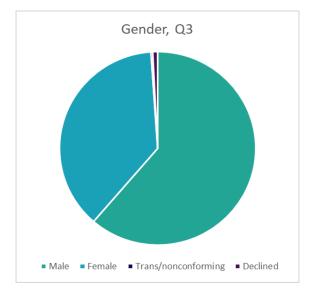
# Table 4. Race reported by clients

Race	Q3(%)	Q3(N)
White	79.4%	933
Declined/unknown	5.9%	69
Multiple	4.2%	49
Black	3.5%	41
Other	3.0%	35
American Indian/Alaskan Native	2.6%	30
Native Hawaiian/Pacific Islander	1.0%	12
Asian	0.5%	6

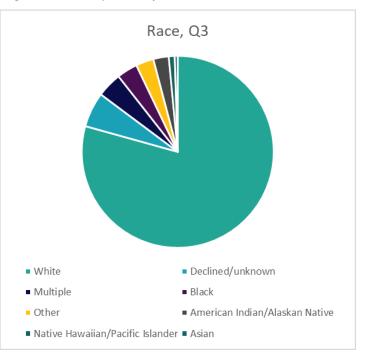
New clients are asked a series of intake questions at their first visit, including questions about gender and race. All data on gender and race is selfreported.

Clients are not asked intake questions about gender or race during follow up syringe exchange encounters. If a client wants to change the self-reported data in their record, they may do so at any time. Gender and race data was not available for 109 participants during the quarter. The percentages in Tables 3 and 4 are based on 1,175 complete client records.

# Figure 1. Gender reported by clients



## Figure 2. Race reported by clients



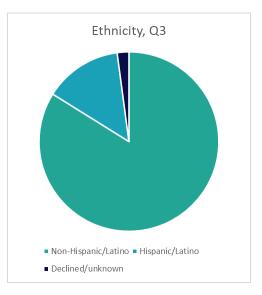
#### Table 5. Ethnicity reported by clients

Ethnicity	Q3(%)	Q3(N)
Non-Hispanic/Latino	83.8%	985
Hispanic/Latino	14.0%	165
Declined/unknown	2.1%	25

New clients are also asked a question about ethnicity at intake.

Ethnicity data was not available for 109 participants during the quarter. The percentages in Table 5 is are based on 1,175 complete client records.

# Figure 3. Ethnicity reported by clients



# Table 6. HCV testing and identification

HCV at intake	January	February	March	Q3 total
Reported HCV positive at intake	17	10	13	40
HCV testing	January	February	March	Q3 total
Tested	39	39	54	132
Tested positive	8	11	18	37
Positivity rate	20.5%	28.2%	33.3%	28.0%

Three syringe service providers gave rapid antibody tests to clients, shown in tables 6 and 7: Utah Harm Reduction Coalition, Salt Lake Harm Reduction Project, and Southeast Utah Health Department. All SSPs collect information on HIV and HCV status upon intake. Two additional syringe service providers offer testing in their clinic locations, that is not reported here: Utah Naloxone and Martindale Clinic.

Syringe service providers who do not provide testing, provide referrals to testing sites and can make testing appointments for clients. All syringe service providers must offer referrals for HCV and HIV testing at each syringe encounter, regardless of testing capability.

## Table 7. HIV testing and identification

HIV at intake	January	February	March	Q3 total
Reported HIV positive at intake	2	1	1	4
HIV testing	January	February	March	Q3 total
Tested	42	44	53	139
Tested positive	0	1	0	1
Positivity rate	0.0%	2.3%	0.0%	0.7%

### Table 8. Referrals

Referrals January	Written	Verbal	Active
Substance use treatment	766	730	61
HCV/HIV testing	765	720	46
Naloxone	766	432	120
Referrals February	Written	Verbal	Active
Substance use treatment	608	556	40
HCV/HIV testing	609	576	50
Naloxone	609	383	109
Referrals March	Written	Verbal	Active
Substance use treatment	794	739	62
HCV/HIV testing	791	777	50
Naloxone	791	594	287
Referrals Q3 total	Written	Verbal	Active
Substance use treatment	4,004	3,903	163
		3,903 3,951	163 146

Substance use treatment, HCV/HIV testing, and overdose prevention/naloxone referrals are required at each encounter for all providers. 'Active' referrals describe a referral where there is direct communication between the provider recommending the additional care and the provider who would provide the care. Active naloxone referrals include the demonstration of how and when to administer naloxone to prevent overdose. Providers may give more than one type of referral. For example, a provider may speak with a client about HIV testing and also schedule an appointment for that client to be tested.

#### Table 9. Substances reported at intake

	January	February	March	Q3 total
Meth	112	54	122	288
Heroin	102	59	109	269
Marijuana	45	29	52	126
Alcohol	29	17	24	69
Tobacco	42	15	29	86
Crack/cocaine	20	10	20	50
Benzodiazepines	15	7	16	38
Fentanyl	8	5	10	23
Prescription pain medicines	7	6	6	19
Suboxone	7	9	12	28
Gabapentin	12	6	8	26
Methadone	2	2	10	14
Spice	6	3	7	16
Subutex	4	2	4	10

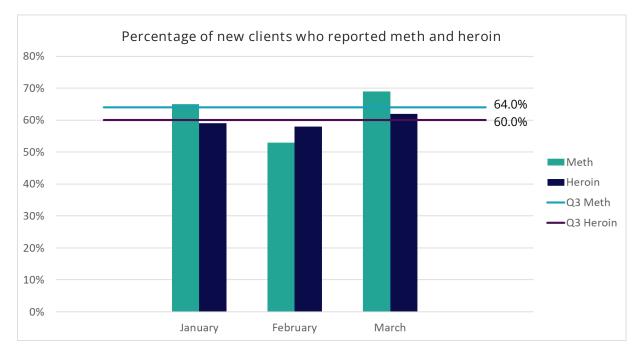
Data is collected from individuals who use the syringe service program at intake, or return to the program from jail or residential treatment center. Individuals are asked what substances they used in the past 30 days.

If an individual used more than one substance, they mark each substance used.

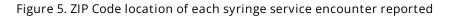
### Table 10. Substances reported at intake, by percentage

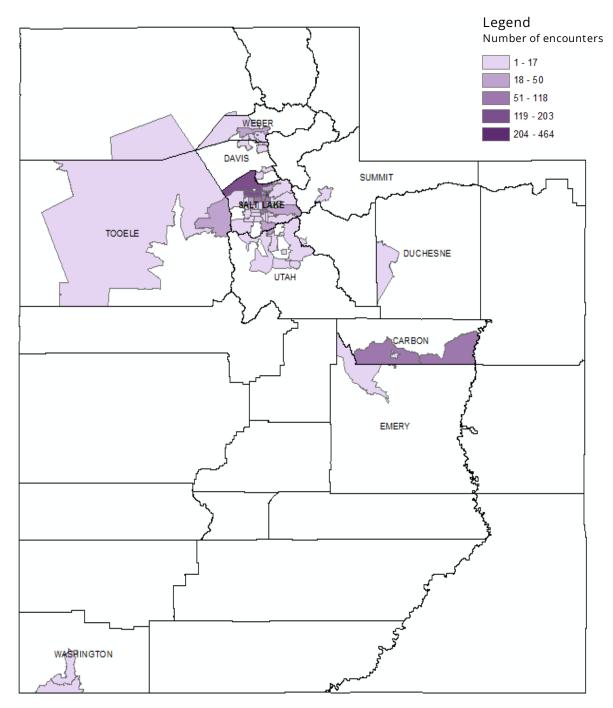
	January	February	March	Q3 total
Meth	65.1%	53.5%	69.3%	64.1%
Heroin	59.3%	58.4%	61.9%	59.9%
Marijuana	26.2%	28.7%	29.5%	28.1%
Alcohol	16.9%	16.8%	13.6%	15.4%
Tobacco	24.4%	14.9%	16.5%	19.2%
Crack/cocaine	11.6%	9.9%	11.4%	11.1%
Benzodiazepines	8.7%	6.9%	9.1%	8.5%
Fentanyl	4.7%	5.0%	5.7%	5.1%
Prescription pain medicines	4.2%	5.9%	3.4%	4.2%
Suboxone	4.1%	8.9%	6.8%	6.2%
Gabapentin	7.0%	5.9%	4.5%	5.8%
Methadone	1.2%	2.0%	5.7%	3.1%
Spice	3.5%	3.0%	4.0%	3.6%
Subutex	2.3%	2.0%	2.3%	2.2%

The table able shows the percentage of new clients who reported using each substance at intake. The two most common substances reported at intake are displayed in the figure below. Most clients report using meth or her-



## Figure 4. Substances reported at intake, by percentage





SSPs record the ZIP Code of the location of each syringe exchange encounter that they perform. The map above displays the ZIP Code location of SSP encounters for the fiscal quarter. ZIP Code locations with higher number of encounters are marked by darker shades of purple.

Additional Zip codes in which at least one person was served: 84084, 84094, 84118, 84096, 84770, 84092, 84404, 84542, 84029, 84095, 84117, 84110, 84403, 84790, 84088, 84016, 84129, 84604, 84011, 84014, 84067, 84109, 84113, 84128, 84003, 84043, 84009, 84015, 84027, 84040, 84057, 84061, 84108, 84126, 84405, 84606, and 84704.

Additional reports on syringe services and fentanyl test strips can be found at

https://ptc.health.utah.gov/prevention/syringe-services/

