

Interviews with Hamilton County S.A.F.E Services (Syringe Service Program) Participants: Observations from the Field



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Agenda

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Welcome and Overview

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Hamilton County Public Health

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Questions/Open Discussion

Learning Objectives

- Describe S.A.F.E. Services participant opinions on ways to increase the safety of illicit drug use.
- Demonstrate the need for continued education to promote the best outcomes with the use of naloxone.
- Examine the impact of stigma from the person using drugs perspective.

Introductions

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Harm Reduction Sub-Committee & Survey Background

HARM REDUCTION COMMITTEE

Of the Hamilton County Addiction Response Coalition

FIGHTING STIGMA | IMPROVING ACCESS



WORKGROUP PRIORITIES

Together with public health, healthcare systems, and community organizations, The Harm Reduction Committee seeks to align resources to reduce substance use-related stigma and improve access to services. Membership is open and voluntary - contact us below for more information!

MISSION

To create a collaborative network of harm reduction service providers that supports the health and well-being of individuals, families, and communities.

VISION

Individuals in Hamilton County (OH) are provided practical strategies, tools and comprehensive access to harm reduction services that are delivered without stigma, meet individual needs, are data-driven, and improve the health of the community.



GUIDING PRINCIPLES:

- Client-focused and responsive to individual needs;
- Delivered without stigma or judgment;
- Values and elevates voices of those in the community using drugs or in recovery to co-design solutions;
- Reflective of the diversity of the communities we serve;
- Equitable and inclusive in response to individual needs based on race, ethnicity, gender, sexual orientation, income, ability, or geography;
- Based in data, evidence, and other promising practices;
- Inclusive of many sectors critical to harm reduction and recovery, including non-traditional partners;
- Coordinated through honest and transparent communication among partners;
- Catalyzed and sustained by a sense of urgency to serve others and save lives;
- Flexible and adaptable to changing (societal and/or environmental) needs;
- Accountable to one another and the broader community to learn from our successes and our failures.

JOIN OUR EFFORTS

LARGE GROUP

Meets monthly or bimonthly

SMALL GROUP

Meets every 4 to 6 weeks

E-ONLY

Receives meeting notes and updates

COMMITTEE

WORKGROUP(S)

COMMUNICATIONS

For More Info
Scan QR Code:



Or Contact Us:

Email: HCPH-HARMREDUCTION@hamilton-co.org



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Survey Methodology

- **Sites:** Interviews were conducted at the Corryville, Northside, Over-the-Rhine, Western Hills, and Walnut Hills S.A.F.E. Services sites
- **Approach:** Hamilton County Public Health staff conducted the interviews and recorded responses in Qualtrics with laptops
- **Dates:** Interviews conducted between May 9 and June 8, 2022
- **Length:** Interviews were 17 minutes in length on average
- **Incentive:** participants received a grocery gift card in exchange for their time

Participant Overview

- **Total participants:** 148
- **Gender:** 77 participants identified as female, 69 as male, and 1 preferred not to say
- **Race and ethnicity:** 4 participants identified as Hispanic/Latino, 9 as Black, 133 as White, 1 as American Indian, 1 as Asian/Pacific Islander, and 4 as other / multi-racial

Race	Participants	County data
Hispanic/Latino	3%	4%
Black	6%	27%
White	90%	68%
American Indian	1%	<1%
Asian/Pacific Islander	1%	3%
Other / Multi-racial	3%	3%

Source: [US Census Quick Facts](#), accessed on June 9 2022

Participant Location

Participants by location

Race	Participants	%
Corryville	36	24%
Northside	33	22%
Over-the-Rhine	24	16%
Walnut Hills (Equitas)	10	7%
Western Hills (Talbert House)	44	30%

This site is the newest and has lower foot traffic than the others, resulting in fewer surveys

Participants by zip code

Zip	Count	%
45202	10	7%
45205	11	7%
45211	6	4%
45216	6	4%
45219	6	4%
45238	21	14%

These six zip codes accounted for 41% of interviews; 55 other zip codes accounted for 59% of interviews but each had 4 or less people from each zip code

Tools To Use Drugs Safely

Do you have the tools to use drugs safely? Tell us about your experiences and the tools you use.

97% of interviews indicated they had the tools needed to use drugs safely

79% of interviews expanded to name the SSP as the reason they are safe

Interviewees mentioned :



Clean water

(9 mentions)

Water is something HCPH is not funded to provide



Alcohol pads

(4 mentions)

Interviewees wanted more alcohol pads offered



Cookers

(3 mentions)

Interviewees mentioned these were not always available



Short + long needles

(2 mentions)

Interviewees wanted a mix of sizes for their needles

Ways To Increase Safety

What could be done to make using drugs safer for you?

- Stop using – 23 mentions
- Safe injection / supervision facility – 15 mentions
- Legalization – 13 mentions
- Not using alone – 13 mentions
- Fentanyl test strips (to test for strength, other drugs) – 12 mentions
- Narcan – 8 mentions
- Clean water – 6 mentions
- Vending machines – 5 mentions
- Closer SSP locations – 5 mentions
- Housing – 5 mentions
- Use small amounts – 4 mentions
- Health information + education – 3 mentions
- Police stigma – 2 mentions

Ways To Increase Safety – Quotes

Interviewees know quitting is the only real way to be safe

“Going to **treatment and stopping altogether**. Otherwise I have everything I need to be safe”

“It would be safer if I did not use”

“Outside of being abstinent, there is really **no safe way**”

“Quitting would be first. **I want to quit but it is really hard**”

“**Stopping all together** and using my coping skills”

Other ways to increase safety

“More **vending machines**”

“A certain **place** where people could go and have others monitor them”

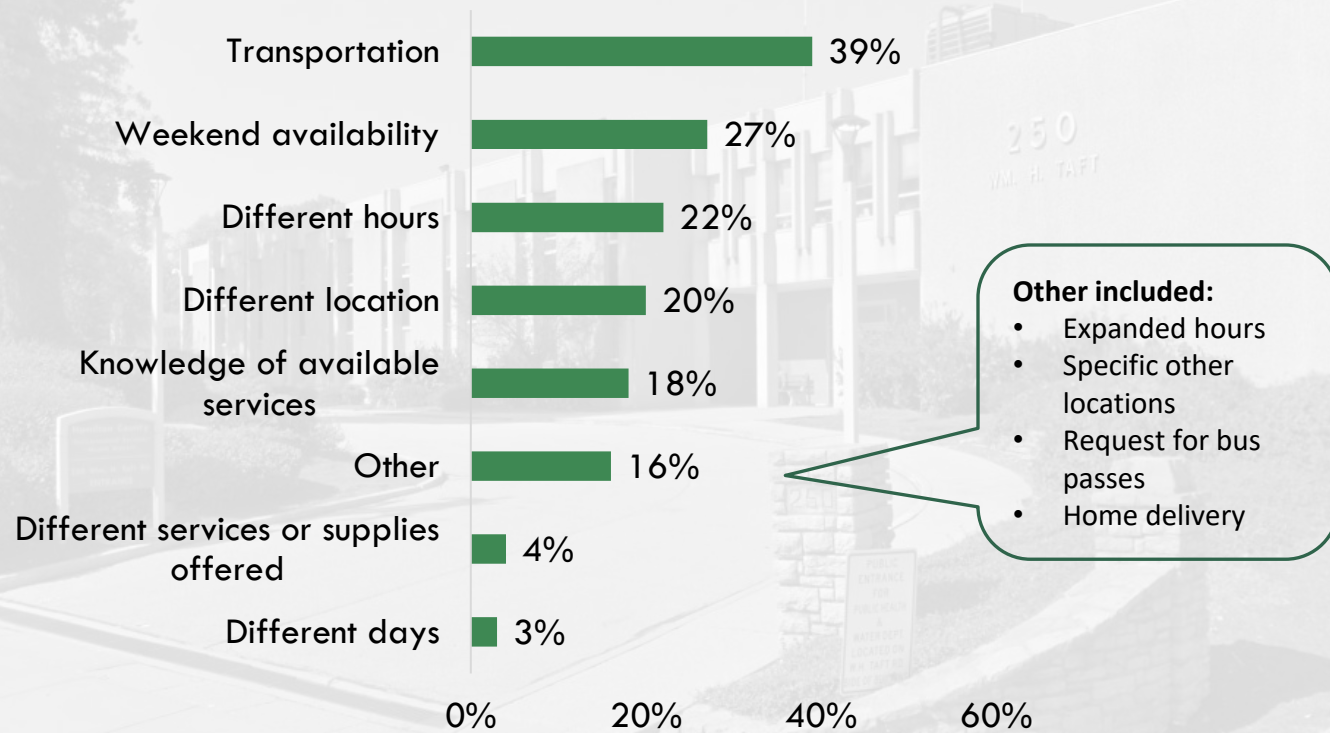
“More **understanding from police**. It is hard to get services if they follow us”

“I use the **smallest amount** to stay well and not chase the high”

“To be sure to not **use alone**”

Ways To Improve Access To Services

What would improve your access to services? (select all that apply)



% of respondents choosing
n = 116

Feedback On How To Increase Access

Participants expanded on access needs, mentioning the following categories (n = 132)

TRANSPORTATION is the biggest barrier for S.A.F.E services clients and others they know

- ❖ 22 people wanted a **location closer to their home**, especially those in other counties or in Kentucky
- ❖ 10 people mentioned **bus passes** would help with transportation
- ❖ 4 people mentioned a **shuttle** would help with transportation

WEEKEND HOURS requested by 15 people, especially those working

MORNING HOURS requested by 8 people, especially those working second shift

Many thanked the Exchange and said services work for them as is

Ways To Address Overdose Deaths

What do you think could be done to prevent overdose deaths?

39% of interviews mentioned the **supply of naloxone**

14% of interviews mentioned **education about how to use naloxone**

26% of interviews spoke of the **importance of not using alone**

16% of interviews spoke of **using small amounts and going slow**

11% of interviews mentioned **criminal justice related topics** – good Samaritan education, police stigma, arresting drug dealers, and legalization of drugs

9% of interviews spoke of **fentanyl test strips**

8% of interviews spoke of **safe injection or supervised high locations for monitoring**



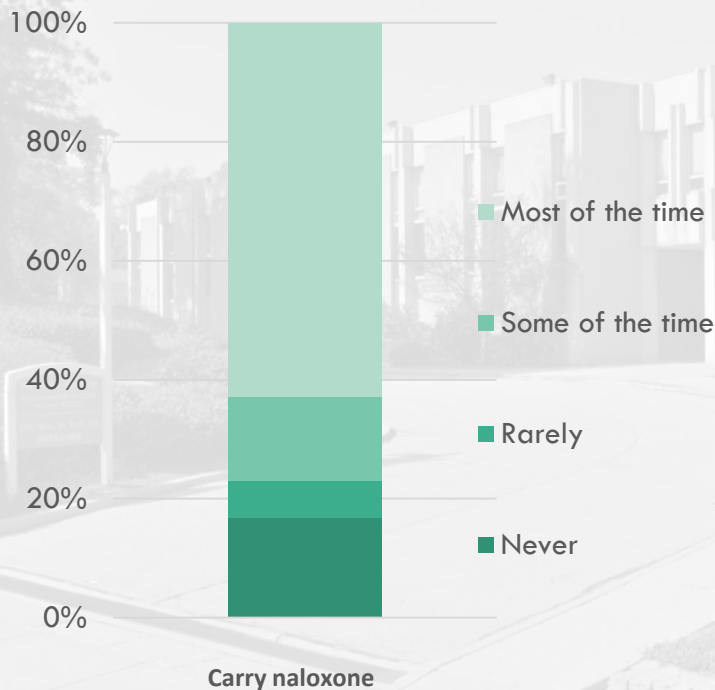
**HAMILTON COUNTY
PUBLIC HEALTH**

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Carrying Naloxone

Do you carry naloxone?



Reasons why people carried naloxone....

MOST OF THE TIME

- **To save lives – their own, someone they know, or someone in the community (90%)**

RARELY OR NEVER

- They only use at home
- They only use alone
- They have legal concerns
- Heroin is not drug of choice / use
- It is not convenient
- Stigma

What Impacts Your Decision To Carry Naloxone

“Quotes”

ALWAYS CARRY

“I want to **save lives**. I always have it on me”

“I’ve **lost so many friends**. Now that we have access it would be stupid not to carry it”

“Think about my mother getting a **call that I have died**”

“I’ve had **five siblings and my mom** die from overdoses”

“My **husband** chases the high and does a lot. I worry about him overdosing”

NEVER OR RARELY CARRY

“It is hard to explain if you have it and you get stopped – the **cops know you do drugs**”

“I am **not sure if it is legal** and I don’t want to get in trouble”

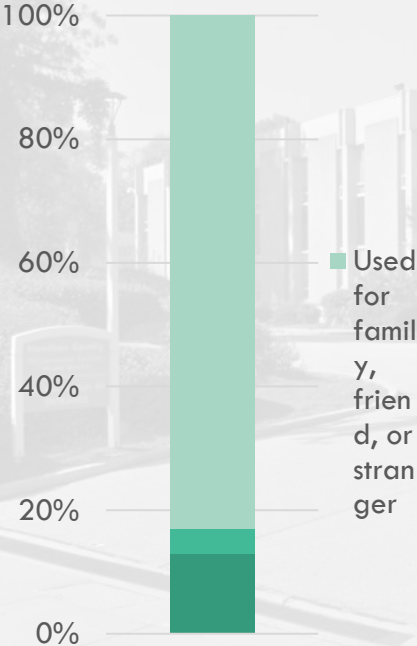
“I only **use at home** so I don’t carry it with me”

“I keep it in **my house for people who come over** and overdose”

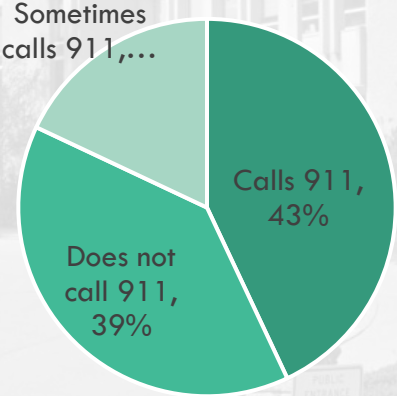
Use Of Naloxone

In what situations have you used naloxone? Did you call 911? What other steps did you take?

Use of naloxone



Use of 911



We also learned that:

- One-third of interviewees specifically mentioned they had to **use more than one dose of naloxone**
- **People do not call 911 because:**
 - The person was ok after naloxone
 - The user of naloxone could monitor the person who overdosed
 - The user of naloxone was afraid of legal implications
 - The person asked for 911 not to be called once they came to

Interviewees' Knowledge Of Fentanyl

Do you know what fentanyl is?

100% of interviews indicated **they know what fentanyl is**

Tell me more about your understanding of fentanyl.

45% of interviews are **seeking fentanyl as a drug of choice**

30% of interviews **try to avoid fentanyl or do not seek it**

7% of interviews indicate they **test for fentanyl**

Interviews also shared:

- Their understanding that fentanyl is now in many forms of drugs (e.g., cocaine, weed, pressed pills)
- Fentanyl is more readily available and cheaper compared to heroin
- Fentanyl is stronger and more dangerous

Thoughts on Fentanyl Use

I use fentanyl every day. In the beginning I did it did, thinking it was heroin. The dealers lied about it for the longest time.

It is the only thing you can use after you start fentanyl.

Fentanyl is the devil and I use it.

Most things are not like the heroin that I first started using. Now I do seek out fentanyl. It is the only thing that produces a strong high for me. I was clean for 7 years and relapsed two years ago. the drugs have changed - what is being sold as heroin is not very good.

Yes it is my drug of choice. It is 100x stronger than heroin and cheap

Fentanyl is stronger than heroin. It is what is out there now. I don't think there is heroin around anymore.

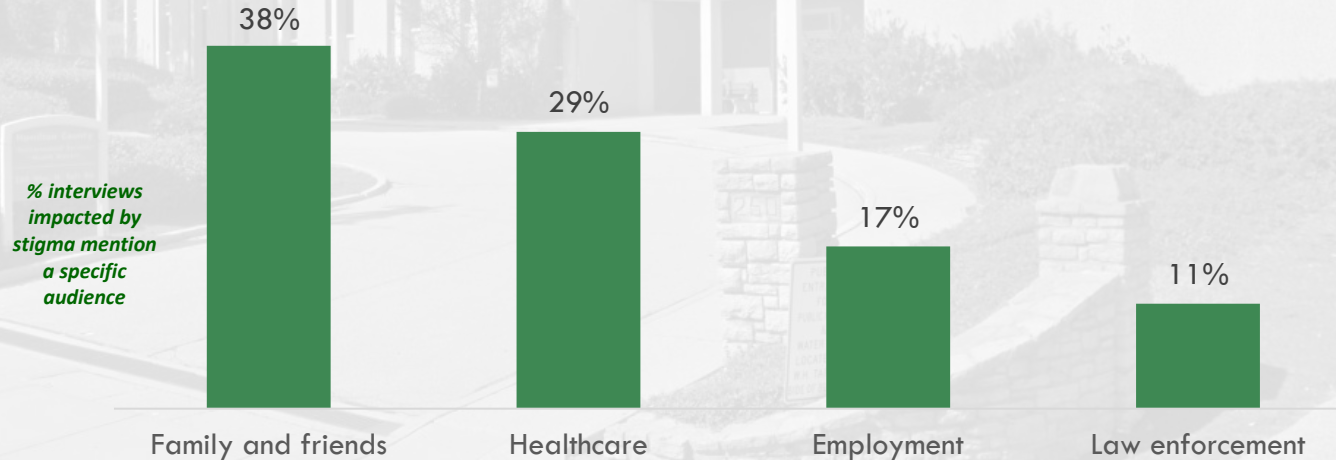
I do seek it out. It's hard to find heroin or any other substances not mixed with fentanyl

The Impact Of Stigma

Has stigma impacted you? Your ability to seek support?

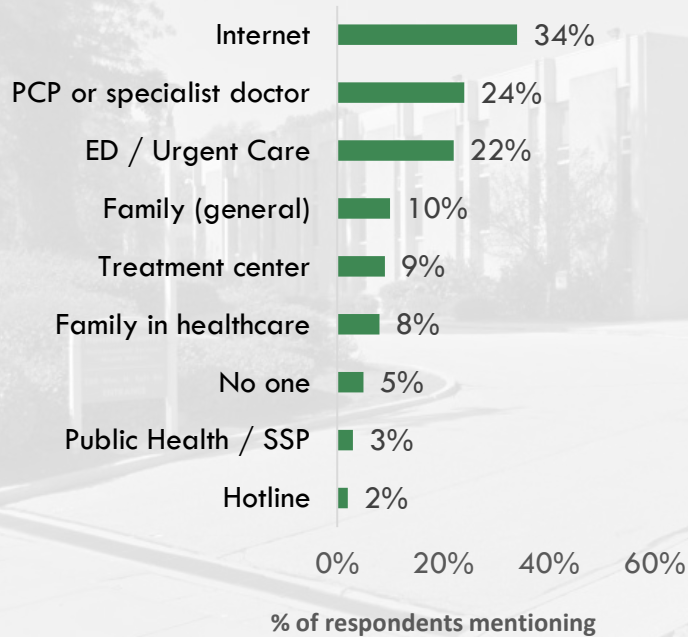
70% of interviews explicitly mentioned **stigma impacting them**

For those that say stigma impacted them, they mentioned the stigma comes from the following audiences:

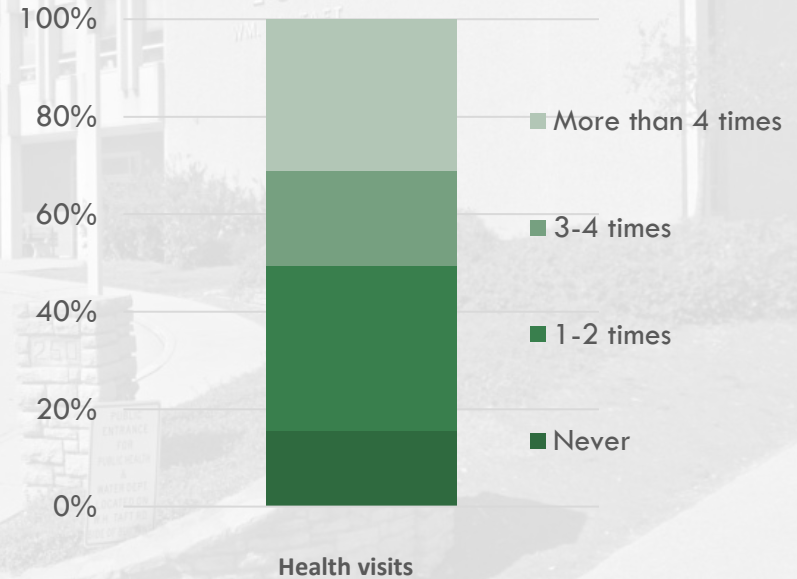


Health Information and Visits

If you have a health question, who do you ask? Where do you go?

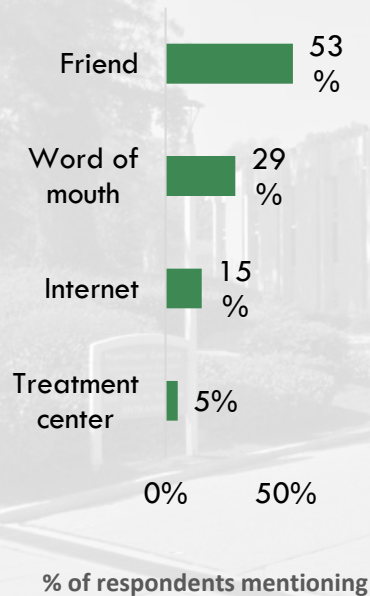


In the past year, how often did you visit a doctor or medical facility?

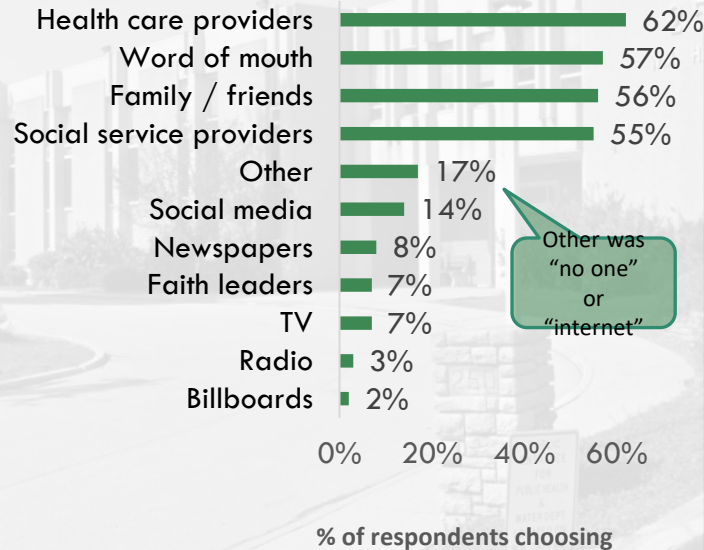


SSP Services Knowledge + Information

How did you hear about our services?



Which three sources of information from the list below do you trust the most?



Reasons why interviewees trust sources of information:

- **Health care providers:** they are educated and knowledgeable; trust is often broken due to stigma
- **Word of mouth, family, and friends:** they can provide help based on lived experience with addiction
- **Social service providers:** they are knowledgeable and compassionate; many people specifically mentioned lived experience and the SSP here
- **Social and mass media:** these outlets have accountability; there was mixed trust in social media

Many individuals said they don't trust anyone based on their experiences

Next Steps: What are we doing with this information?

- Now, bags of short + long syringes are offered at SAFE services locations
- Increased hours at Western Hills and Northside locations
- Continued education around use of naloxone
- Meeting with other naloxone distributors in the county to see how we can collaborate
- Healthcare services offered at Caracole on Thursdays (wound care + basic care)

Questions?



THANK YOU!

Please take a moment to fill out the very brief webinar survey.

We really appreciate it and ***Thank You!***

[Webinar Survey Link](#)