Disclaimer:

The views, opinions, and content expressed in this presentation do not necessarily reflect the views, opinions, or policies of the Center for Mental Health Services (CMHS), the Substance Abuse and Mental Health Services Administration (SAMHSA), or the U.S. Department of Health and Human Services (HHS).
How to ask a question during the webinar

You may either use the “raise your hand” button and we will open up your lines for you to ask your question to the group. (left)

OR

Type your questions into the question box and we will address your questions. (right)

SESSION IS BEING RECORDED

Today’s Agenda

1. Welcome
2. Mobilizing Local Communities to Support SSP’s
3. Engaging and Retaining Clients in SSP’s
4. Grantee Discussion and Questions
5. Wrap-up and Next Steps
Mobilizing Local Communities to Support Syringe Exchange Programs

Recruiting and Retaining Clients

Nancy Kingwood-Small, MA, MS

GBAPP (Greater Bridgeport Area Prevention Program), Inc.

Works To:  
- Reduce teen pregnancy;  
- Reduce the spread of HIV;  
- Increase access to care and supportive services;  
- Enhance positive relationships; and  
- Promote personal responsibility.

Empowering Individuals to make informed healthy decisions
Established in 1983, GBAPP provides services to five surrounding towns
Was the first maternity home in the state
Housing programs for youth ages 16 to 21 in partnership with the State of CT Department of Children and Families
Teen Pregnancy Prevention Program
Teen Fatherhood Initiative
Life Skills classes

Drug Free Communities/Bridgeport United Coalition
Faith Based Initiative, engaged over 60 faith based organizations
Syringe Exchange Program, including Narcan training and distribution
Case management, HIV and Hep C screenings, outreach, trauma groups for women,
Early Intervention Services
Evidence based model programming
Lead Agency for Ryan White Funding with six subcontractors

Bridgeport Syringe Exchange Program

Obtained contract in February 2015
Worked with the media and other local stakeholders as the contract transitioned
Currently 1,046 unduplicated clients access the SSP van
Previous contractor had 168 unduplicated clients
Held town halls and used social media to promote the program
Number of SSP Clients

<table>
<thead>
<tr>
<th>Total Clients 2016</th>
<th>Total Clients 2015</th>
</tr>
</thead>
<tbody>
<tr>
<td>986</td>
<td>605</td>
</tr>
</tbody>
</table>

Number of SSP Clients by Visits

<table>
<thead>
<tr>
<th>2015 Visits</th>
<th>2016 Visits</th>
</tr>
</thead>
<tbody>
<tr>
<td>3645</td>
<td>8790</td>
</tr>
</tbody>
</table>
Number of SSP Clients by Age Group

Number of SSP Clients who self-reported a HIV/AIDS, HEP C, TB or Co-infection diagnosis
Number of SSP Syringes Collected and Distributed 2015-2016

<table>
<thead>
<tr>
<th>Year</th>
<th>Syringes Distributed</th>
<th>Syringes Collected</th>
</tr>
</thead>
<tbody>
<tr>
<td>2015</td>
<td>126295</td>
<td>51013</td>
</tr>
<tr>
<td>2016</td>
<td>94479</td>
<td>36876</td>
</tr>
</tbody>
</table>

Narcan OD Kits Distribution 2015-2016

<table>
<thead>
<tr>
<th>Category</th>
<th>2015</th>
<th>2016</th>
</tr>
</thead>
<tbody>
<tr>
<td>OD Kits</td>
<td>55</td>
<td>386</td>
</tr>
<tr>
<td>OD kits to SSP Clients</td>
<td>55</td>
<td>144</td>
</tr>
<tr>
<td>Returned for 2nd kit</td>
<td>21</td>
<td>4</td>
</tr>
</tbody>
</table>
Narcan OD Kits Distribution 2015-2016, Continued

Additional Information

Substance Abuse Referrals
- 19 referrals to detox
- 34 to methadone

HEP C tests 2016
- 29 tests
- 5 positives

HIV Tests 2016
- 281 tests, 21 done in SSP van
GBAPP’s Strategies for Mobilizing the Community

- Community mapping - to identify hot spots in local neighborhoods
- Identified non-traditional community gatekeepers (pool room owners, package store businesses, etc.)
- Partnership with the media (local newspaper)
- Held town halls to address neighborhoods concerns
- Met with local leaders
- Intensive and targeted outreach
- Outreach during non-traditional hours (night and morning reach)
- Distributed flyers and brochures highlighting van stops and staff contact information
- Social media platforms - posted supportive articles
- Held Twitter chats about the realities of IV substance use
- Met with local partners and medical providers
- Developed referral system to help clients access treatment more quickly
- Informed local law enforcement about our program and state statues concerning syringe exchange

Why mobilize and engage the community?

- NIMBY, Not in my Back Yard:
  - Inform Residents - where the SSP van will be in their neighborhood
  - The support of the community is critical to success
  - Many people do not support the SSPs out of fear of what might happen in the neighborhoods
  - NIMBY can become political
  - Education is Power! People need to have access to factual information about the success of SSPs and its effectiveness
What local communities need to know

SSPs are:

- Successful reducing the spread of HIV/AIDS, Hepatitis
- Cost Effective
- Provide resources to individuals and families
- Offer education
- Help keep the community clean
- Have an established referral system in place to access treatment
- Part of a larger prevention and treatment programs


STRATEGIES FOR ENGAGEMENT AND RETENTION IN SYRINGE EXCHANGE PROGRAMS
Engaging Clients in Syringe Exchange Programs

- Hire **indigenous leaders** from the community
- **Use your data** and information from community mapping
- Develop strategies for going into those neighborhoods
- Make sure you have a **community champion** in the location where you will park the van
- Engagement strategies are important for better outcomes

Retaining Clients in Care and Treatment

- Use of **incentives**
- Use a **gender specific treatment curriculum**
- Invite clients to other organization **events**
- Work with **local courts, probation and parole**
- Work with **local politicians**
- Identify **supportive traditional gatekeepers** (i.e. church and civic leaders)
- Become a **trusted leader** in the community
- Use **motivational interviewing** during the intake and assessment process
Retaining Clients in Care and Treatment

- **Diversity** in Staffing
- **Use of Technology** (cell phones, text messages) to keep the client engaged and for appointment reminders
- **Address Stigma** in the context of culture
- **Cultural Competence** (Sensitivity)
- **Peer Support Component**
- **Use of non-traditional gatekeepers**

Lessons Learned

- It takes a community to effectively address substance use
- Client’s level of readiness is important to better long term outcomes
- Gatekeepers and stakeholders know their community and neighborhoods
- All services must be client centered
- The media can help to positively promote the program
- Social media can be used to help influence community norms
Lessons Learned continued

• All sectors of the community can assist with recruitment and retention (community and faith based organizations, health departments, shelters, etc.)
• Partnerships are important and can help maximize resources

*Resources*
CDC.gov
SAMHSA.gov

MAI-CoC SSP & EBP Community of Practice

GRANTEE
QUESTIONS & DISCUSSION
Next Steps…

Coaching call before Session 3?

Session 3 – EBP- Motivational Interviewing

Other Topics to explore during the CoP?
- What topics would you like to focus on?
- Are there resources that you would like to share?

Resources – SSP & EBP CoP

NIATx Promising Practice. 2009. University of Wisconsin
- Using Motivational Interviewing During Treatment.  
  [link](http://www.niatx.net/toolkits/provider/PP_UseMITreatment.pdf)
- Use the Spirit of MI During First Contact  
  [link](http://www.niatx.net/toolkits/provider/PP_UseMIFirstContact.pdf)
- Wisconsin Motivational Interviewing Fidelity Tool  
  [link](http://www.niatx.net/toolkits/provider/WisconsinMIFidelityTool.pdf)
Session #3

Wednesday, April 26th 2:00 -3:00 PM ET

Additional Questions

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Additional Comments?
Contact the SAMHSA-HRSA Center for Integrated Health Solutions integration@thenationalcouncil.org or MAI-COC-TA@mayatech.com
Slides for today’s CoP are available on the CIHS website at:


For More Information & Resources

Visit www.integration.samhsa.gov or e-mail integration@thenationalcouncil.org
Thank you for joining us today.

Please take a moment to provide your feedback by completing the survey at the end of today’s webinar.