

Syringe Access Program Needs Assessment

Denver Department of Public Health & Environment | 2023

The Denver Syringe Access Program Needs Assessment (SAPNA) Project was conducted by the Denver Department of Public Health & Environment's (DDPHE) Community and Behavioral Health Division to assess needs and barriers for Denver residents who use syringe access programs in the City and County of Denver.

Individuals were eligible to complete the survey if they were a syringe access program participant. Participants were invited to take the online survey in-person on electronic tablets at two syringe access programs in Denver, Access Point at Colorado Health Network and Harm Reduction Action Center, using a convenience sampling technique. A total of 923 completed surveys were collected.

Assessment Findings

Below are key survey findings. For more information on survey methods and results, please reference the full 2023 Syringe Access Program Needs Assessment Report.

1. Smoking-related resources were needed by the most participants compared to other harm reduction resources (e.g., clean smoke pipes, other smoking supplies, and information about being safe while smoking drugs were needed by 88.8%, 82%, and 77.9% of participants, respectively; N=923).

Survey findings also showed greater preference towards smoking drugs compared to injecting drugs (see Figure 1).

Number of Participants Who Smoked vs. Injected by Drug Type, N=923

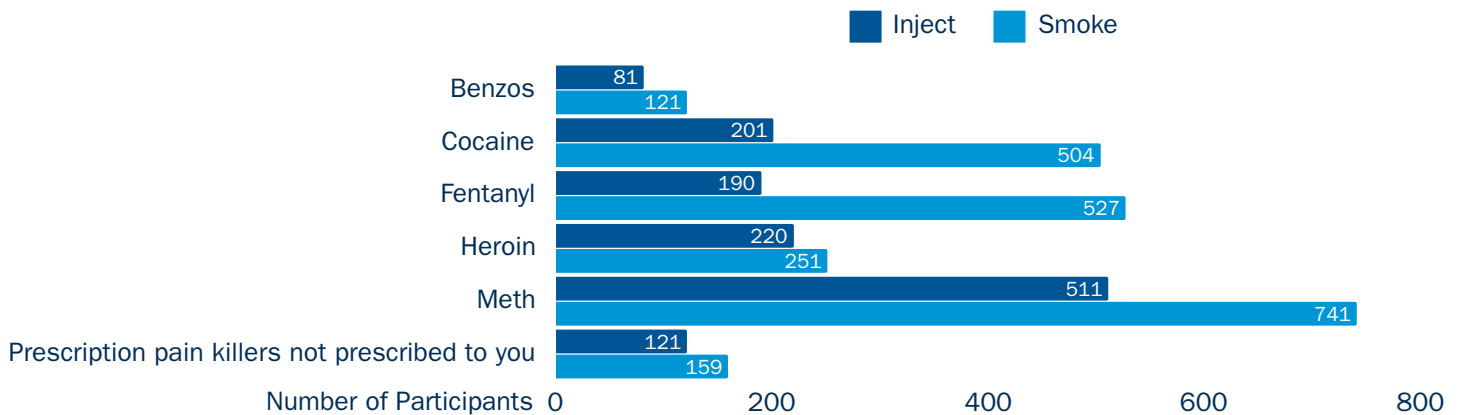


Figure 1. Number of participants who reported smoking drugs and injecting drugs in the past month by drug type.

*Please note that polysubstance use (the use of multiple substances at once) was not assessed by the survey and is not reflected in these results.

2. Overdose prevention resources were not as easy to access for Latinx and Black participants compared to white participants (e.g., Average ease of access was significantly different for Latinx participants (mean = 3.2, SD = 0.89, p=0.02) and Black participants (mean = 3.19, SD = 0.93, p=0.03) compared to white participants (mean = 3.42, SD = 0.76).

3. A referral for medication assisted treatment (MAT) was the hardest resource to access compared to all other overdose prevention resources (e.g., One in four participants who needed a referral for MAT reported that it was somewhat hard or very hard to get).

4. The top challenges for accessing harm reduction and overdose prevention resources were environmental barriers (e.g., lack of transportation (45.8%, N=371) and the program being too far way (40.2%, N=371) were the top barriers for participants who found it difficult to get harm reduction resources).

5. Syringe access programs were the primary location that participants used for sharps disposal (e.g., 63% of participants reported disposing of used syringes at HRAC and 67% reported disposing of used syringes at Access Point in the past month).

6. Awareness and use of city-funded sharps disposal kiosks is limited. Almost half (45.7%, N=475) of participants were not at all familiar with the city-funded sharps disposal kiosks and more than half (53.7%, N=475) of participants reported never using the kiosks for sharps disposal in the month leading up to the survey.

Assessment Recommendations

Based on project findings, the project team recommends that DDPHE develop goals and strategies to act on the following topics:

Improve access to lifesaving harm reduction and overdose prevention resources

- Prioritize education and supplies that help people to be safe while smoking drugs.
- Address transportation and location barriers that limit access to resources for example through policy initiatives and additional funding for bus tickets, ride shares, outreach and mobile units.
- Focus overdose prevention resource distribution efforts on Latinx and Black communities in Denver.

Support policy initiatives to reduce barriers to services

- Support amending Denver City Ordinance Sec. 24-157 - Registration of qualified needle exchange and treatment referral programs, by removing requirements that limit access to harm reduction and overdose prevention resources.
 - Cap on syringe access programs that can operate.
 - Requirement for fixed syringe access program sites to operate 1,000 feet from elementary and secondary schools and licensed childcare centers in Denver.

Strengthen referral pathways for support services

- Strengthen referral pathways by addressing transportation issues and implementing strategies that support participants throughout the referral process for example by building up provider capacity by increasing funding to hire additional staff who can support resource navigation and warm hand-offs for support services.

Increase public knowledge and awareness around safe sharps disposal

- Increase knowledge and awareness of safe and unsafe sharps disposal methods in Denver.