

**BACKGROUND**

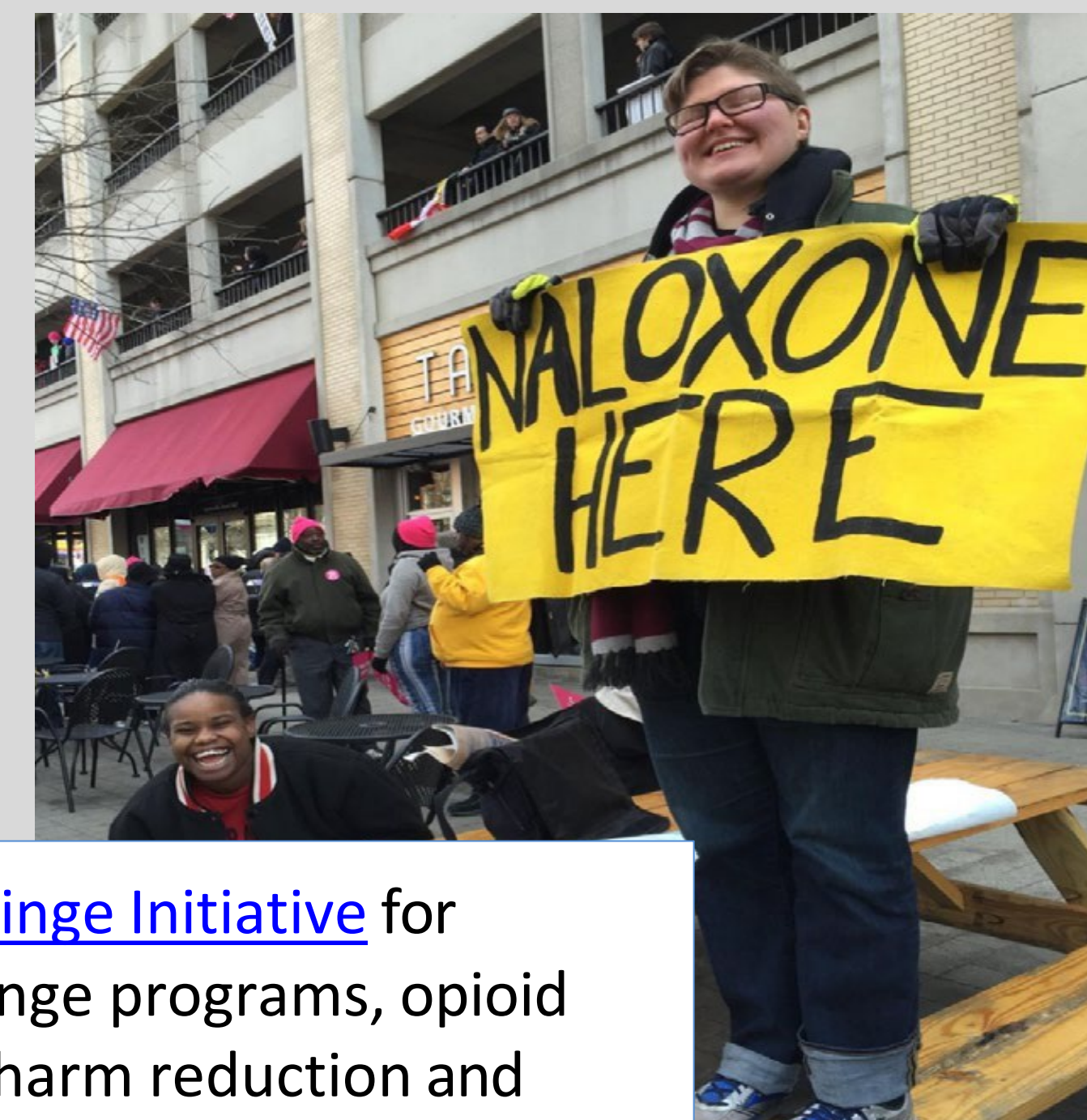
North Carolina is facing an overdose epidemic driven by prescription opioids, heroin, fentanyl, and fentanyl analogues. Syringe services programs (SSPs) are an evidence-based strategy to reduce overdose deaths, reduce transmission of bloodborne pathogens including HIV and hepatitis C (HCV), and connect participants to treatment and care. COVID-19 presented unique challenges for all health systems, including SSPs. COVID-19 has disproportionately affected populations placed at higher risk and who are medically underserved, including racial and ethnic minority groups, and people living in rural communities. North Carolina's Opioid Action Plan was released in June 2017 with community partners to combat the opioid crisis. Updates to the 2019 plan include a broadened focus on polysubstance use as well as centering equity and lived experiences to ensure that the strategies address the overdose epidemic are led by those closest to the issue. The plan also focuses on four priority areas to address the epidemic.

**METHODS**

IVPB provided funding and technical assistance to three Syringe Service Programs (SSPs) to support program infrastructure and increase capacity, with a focus on increasing access to services for individuals belonging to historically marginalized populations (HMPs). Each grantee identified and selected an HMP as their population of focus based on the composition and needs of their community. Grantees hired outreach navigators to strengthen racial equity within their overdose prevention and harm reduction programming, with a focus on addressing disparities that were exacerbated during the COVID-19 pandemic.

**FINDINGS**

Grantees reported increased engagement with participants from historically marginalized populations, increased connection to comprehensive care, and increased distribution of harm reduction and hygiene supplies. The grantees also reported the creation of culturally and linguistically competent services and materials, as well as increased staff training and awareness of disparities amongst HMPs. There were also reports of barriers including inability to gain entry into HMP communities, and challenges surrounding SSP operation in general.



Visit the [North Carolina Safer Syringe Initiative](#) for information about syringe exchange programs, opioid overdose prevention, and other harm reduction and treatment resources in North Carolina.

**RESULTS**

IVPB is still collecting and analyzing data related to the intended impacts, specifically expanded access to SSPs, harm reduction, and healthcare services including COVID-19 testing, vaccination, and treatment to HMPs who are facing greater health disparities in accessing care services due to the pandemic.

**Lessons Learned**

Community-based SSPs are vital resources in the areas that they serve; by removing traditional barriers to access, they provide referrals and connection to a variety of services that increase positive health outcomes. Of the programs funded, the most effective were those who already had well-established relationships with the HMPs they chose to focus on. For future funding opportunities, the existence of established relationships should be considered.

Priorities for the Opioid and Substance Use Action Plan

- Equity and Lived Experiences at the Center
- Prevent: Prevent future addiction and address trauma by supporting children and families
- Reduce Harm: Move Beyond Just Opioids to Address Polysubstance Use
- Connect to Care: Increase Treatment Access for Justice Involved People & Expand access to housing and employment supports, and recover from the pandemic together

