

Background

SSPs address critical **public health challenges**:

More than 100,000 fatal overdoses occurred over the course of the year ending in April 2021¹

HIV outbreaks among people who use drugs (PWUD) have been reported in at least 10 jurisdictions since 2015²⁻⁶

Hepatitis A & C cases are on the rise and progress against hepatitis B has stalled, disproportionately affecting PWUD⁷

SSPs provide lifesaving **public health services**:

Distribute & dispose of syringes & other substance use equipment → Preventing the spread of HIV & hepatitis

Provide/connect clients to overdose prevention, health, social services → Preventing overdose & promoting the health & well-being of PWUD

Meet PWUD where they are → Building trust, creating opportunities to promote health & address inequities

M&E (including data collection, management, analysis, evaluation, reporting, & use) enables SSPs to prioritize and improve services, optimize the use of limited resources, address gaps and advance gaps, and create buy-in for harm reduction.

Strengthening Monitoring & Evaluation (M&E) at Syringe Services Programs (SSPs): Opportunities, Needs, & Priorities

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Conclusions

Challenges: Insufficient and unsustainable funding that comes with significant reporting requirements limits SSPs' ability to efficient M&E systems that equip them with actionable data

Goals: SSPs recognize the value of M&E for internal and external purposes; in particular, many want to use M&E data to address gaps and advance equity and increase buy-in for harm reduction in their communities

Priorities: Many SSPs need investments to build their data collection and management capacity—which is critical to helping them achieve their goals for how they analyze, report, share, and use data

Needs: SSPs need sustainable funding to invest in M&E infrastructure, including software and equipment and staff development; SSPs also need continued support (resources, TA) to enhance all aspects of their M&E work

Recommendations

Funders/Authorizing Agencies (including LHDs):

- Funders should ensure they are providing adequate funding for M&E generally and for SSPs to meet their reporting requirements
- Funders and authorizing agencies should partner with SSPs to streamline and when possible, reduce, reporting requirements and ensure that reporting provides actionable data for all parties
- Funders should design grants to meet SSPs' goals, priorities, and needs for M&E, as outlined here or through further consultation

Partners, including LHDs and TA providers:

- LHDs and TA providers should support SSPs M&E activities as outlined here or through further consultation
- LHDs should partner with local SSPs to build M&E capacity and leverage one another's data, expertise, and community connections

SSPs (including LHDs that operate SSPs):

- SSPs should explore different data collection strategies (e.g., what data should be collected on a routine basis and what can be collected on a periodic basis, e.g., through surveys)
- SSPs should prioritize collecting data that is either required or useful and actionable to meet their goals
- SSPs should consider how they can engage clients in M&E, including to improve the data collection process for clients
- SSPs should work to identify their goals for M&E and align their data collection and analysis activities accordingly

Top SSP M&E Challenges

Funding is insufficient and unsustainable, making it hard to invest in infrastructure (e.g., software) or staff development to gain M&E skills

M&E System Design: M&E systems are often designed in response to funders' reporting requirements & don't meet SSPs' programmatic needs

- Reporting requirements vary across funders, authorizing agencies & change over time
- Data and analyses required by funders, authorizing agencies don't provide SSPs with information to assess program impact or inform program improvement

Data Collection Barriers:

Data collection can be time consuming or traumatizing, stigmatizing, & invasive for clients

- Data collection can take a long time, creating wait times for services
- Data collection may address sensitive topics: discussion of overdose reversal may be traumatizing; the criminalization and stigmatization of substance use can contribute to privacy concerns among clients

SSPs' Top Goals for M&E

Improve M&E infrastructure, processes

- To improve accuracy, consistency of data; reduce staff time spent on M&E and/or ensure staff time results in useful, actionable information

Inform program improvement

- Including by identifying gaps in services; identifying gaps in who is and isn't being reached and served by SSP; tailoring, adapting, and improving services; & better targeting outreach – and cutting across these goals, to advance equity

Evaluate & demonstrate program impact

- Including to inform program improvement and increase buy-in for services

Inform & influence stakeholders

- Including: make it easier to report data to funders; enhance applications for funding; create buy-in for their program; advocate for policy change; facilitate partnership building

"The...goal will be to compare our current offerings with the needs of our community"

-NACCHO-funded SSP on how they hope to use data to inform program improvement

"By connecting service and outcome data, we will be better able to understand the impact of [our] services on important client outcomes."

-NACCHO-funded SSP on why they hope to use data to evaluate & demonstrate impact

"We want to be able to share this data with Public Health. We have a very unengaged local health jurisdiction when it comes to harm reduction activities and how they are the most important entry point for the [Hepatitis C] continuum of care."

-NACCHO-funded SSP on how they hope to use data to inform & influence stakeholders

"Data... can drive program service improvements by zip code of participants. This would provide the data to build support for the need of a mobile SSP unit or for an SSP location in [county]."

-NACCHO-funded SSP on how they hope to use data to inform program improvement

"[The survey] will enable us to gather empirical evidence supporting the positive impact our organization has on clients"

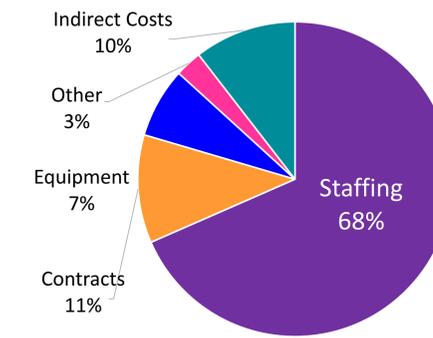
-NACCHO-funded SSP on why they hope to use data to evaluate & demonstrate impact

"We anticipate this may be a good opportunity to share relevant data with certain [organizations] ... whom we are actively working with to build partnerships."

-NACCHO-funded SSP on how they hope to use data to inform & influence stakeholders

SSP M&E Needs

A Breakdown of Funded SSPs' Budgets



68% Staffing Incl. harm reduction program staff; data & research managers & other specialists

11% Contracts Incl. SSP clients and/or peers; support for building out software systems or conducting data analysis

7% Equipment Incl. tablets, laptops

SSPs' Priorities & Rationale for M&E Capacity Building Projects

Data Collection

Implementing or improving **routine** data collection



Conducting or improving **periodic** data collection

Priority Data Collection Activities:

- Digitizing data collection
- Developing or improving data collection forms
- Implementing point-in-time surveys
- Collecting qualitative data (interviews, focus groups)

"We're currently spending hours per week manually entering data from our paper forms...Tablets will reduce staff time"

-NACCHO-funded SSP on why they want to digitize data collection

"We hope to establish a foundational knowledge of what is and is not working within our current systems of data collection...for staff, volunteers, and participants"

-NACCHO-funded SSP on why they want to improve their data collection processes

"Questions about risk-related behaviors...were optional, meaning that the data collected was likely not representative of [SSPs] client population"

-NACCHO-funded SSP on why they want to conduct a survey

"[We plan to] eliminate data measures that are deemed as stigmatizing"

-NACCHO-funded SSP on why they want to improve and reduce data collection

"Our data collection is separate for each program and [the survey] can help us conduct a comprehensive data collection [set]"

-NACCHO-funded SSP on why they want to conduct a survey

"The new database will also cut down on the time that it takes to extract and synthesize data for grant reports and reports to stakeholders"

-NACCHO-funded SSP on why they want to implement software

"[Software] will serve as a hub for our data across programs"

-NACCHO-funded SSP on goals for software

"Our data is transcribed and then set to an external provider to host. We have to request all reports through the external provider, which is cumbersome and can cause delays in reporting. The [software] should alleviate all of these processes."

-NACCHO-funded SSP on why they want to implement software

Data Management

Implementing **software & processes** for data management

"Using the software is a much better use of staff time...[Freeing up time for] engagement with clients and patients [which] is paramount."

-NACCHO-funded SSP on why they want to implement software

"[Implementing our own software] will allow us to 'own' our data"

-NACCHO-funded SSP on why they want to implement software

Data Analysis, Review, Reporting, Use

Priority Activities for Data Use:

- Establishing processes for routine data analysis
- Conducting one-time or periodic data analysis or evaluation projects
- Establishing processes for routine data review (internal) and reporting (to funders, authorizing agencies)



"clients will be able to participate in data review...guiding programmatic decisions in the future"

-NACCHO-funded SSP on how they want to modify data review processes through this project

"Increased ability to tell deep and meaningful stories generated from analysis and backed by data, will allow us to create conversations eliciting increased community buy-in."

-NACCHO-funded SSP on why they want to enhance data analysis

"The primary benefit from implementing this process will be the ease in (and usefulness of) new data analysis options"

-NACCHO-funded SSP on why they want to establish a process for routine data analysis

The Project & Partners

NACCHO & University of Washington (UW) teamed up to build capacity for SSP M&E and the use of M&E data

Project includes distribution of funding and technical assistance (TA) to 25 SSPs across 3 projects; distribution of free TA by UW through the National Harm Reduction Technical Assistance Center (NHRAC); development of tools, trainings, webinars; and consultation with SSPs

Methods

This poster characterizes lessons learned from NACCHO and UW's shared SSP M&E capacity building activities, including but not limited to:

- Application data:** 104 applications from SSPs to three funding opportunities for M&E provided insights into SSPs' priorities, what they would like to do to enhance their M&E systems, how they would like to use M&E data, and what they need to do it
- Evaluation of 25 funded SSP M&E projects:** project evaluation data & project records provided insights into challenges, successes, TA needs
- Consultation with SSPs:** Through consultation with SSPs, NACCHO and UW have gained new insights and validated the findings of the data sources listed above

Spotlight: National Harm Reduction TA Center

Free TA available to support harm reduction activities at

<https://harmreductionhelp.cdc.gov/>



References

- CDC. (2021, November 17). https://www.cdc.gov/nchs/pressroom/nchs_press_releases/2021/20211117.htm
- Lyss, S. B., Buchacz, K., McClung, R. P., Asher, A., & Oster, A. M. (2020). Responding to Outbreaks of Human Immunodeficiency Virus Among Persons Who Inject Drugs-United States, 2016-2019: Perspectives on Recent Experience and Lessons Learned. *The Journal of infectious diseases*, 222(Suppl 5), S239-S249. <https://doi.org/10.1093/infdis/jiaa112>
- Minnesota Department of Health. (2020, February 6). *Health Advisory: HIV Outbreak in Persons Who Inject Drugs (PWID)*. <https://www.health.state.mn.us/communities/ep/han/2020/feb3hiv.pdf>
- Massachusetts Department of Public Health, Boston Public Health Commission. (2021, March 15). *Increase in newly diagnosed HIV infections among persons who inject drugs in Boston*. <https://www.mass.gov/doc/joint-mdph-and-bphc-clinical-advisory-hiv-transmission-through-injection-drug-use-in-boston-march-15-2021/download>
- Indiana Department of Health. (n.d.) HIV Outbreak. <https://www.in.gov/health/hiv-std-viral-hepatitis/hiv-outbreak/>
- Hershov RB, Wilson S, Bonacci RA, et al. *Notes from the Field: HIV Outbreak During the COVID-19 Pandemic Among Persons Who Inject Drugs – Kanawha County, West Virginia, 2019–2021*. *MMWR Morb Mortal Wkly Rep* 2022;71:66–68. DOI: <http://dx.doi.org/10.15585/mmwr.mm7102a4>
- NACCHO. (2021, May 21). *CDC Releases 2019 Viral Hepatitis Surveillance Report*. <https://www.naccho.org/blog/articles/cdc-releases-2019-viral-hepatitis-surveillance-report>

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