

Evaluating the Distribution of Smoking Supplies as a Harm Reduction Strategy

RFA Informational Webinar

Kat Kelley

kkelley@naccho.org

September 27, 2023

Introductions



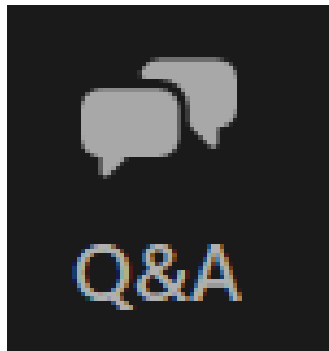
Kat Kelley (she/her)

Sr. Program Analyst, HIV, STI, & Viral Hepatitis

kkelley@naccho.org

Housekeeping

Please submit questions using Q&A feature, pictured below:



All questions asked during this webinar—including those that are unanswered (if we run out of time)—will be answered and posted on the RFA announcement page by the end of the week:

bit.ly/SmokingSuppliesRFA

Agenda

- Background
- Overview
- Goals & Activities
- Eligibility
- Use of Funding
- Selection Criteria
- Application Instructions
- Q&A

Background

Distributing smoking supplies can:

- **Reduce the risks associated with smoking** (e.g., injuries from makeshift or broken equipment, the spread of infectious diseases from sharing equipment)¹⁻³
- Encourage or facilitate people to **transition from injection to smoking**, which can reduce the risk of overdose and infectious disease⁴⁻⁶
- **Engage a broader population** of people who use drugs (PWUD) than distributing injection equipment alone



Background

NACCHO has also heard from programs and partners:

- As fentanyl overtakes heroin in the drug supply, **more opioid users** are, or would like to, transition **from injecting** (primarily heroin) to **smoking** (primarily fentanyl)
- **Importance of reaching stimulant users**, who may be more likely to smoke, as 4th wave of overdose epidemic⁷ is characterized by increase in fentanyl/stimulant-involved overdoses

Background

In a recent [survey](#), NACCHO heard from programs that:

- **Distributing smoking supplies can:**
 - Improve health, including through transition from injection to smoking
 - Increase reach and engagement - especially among Black and other PWUD of color; people who primarily smoke, not inject
 - Increase engagement in other services (e.g., naloxone trainings, MAT, HIV testing) for existing/new clients
- **Factors that affect feasibility/success:**
 - Barriers: legal/policy, funding restrictions, supply chain, community or policymaker pushback
 - Facilitators: champions/leadership support, data from participants

Background

Many harm reduction programs see the benefits of distributing smoking supplies firsthand.

This project can help document, validate/quantify, and promote those benefits to the broader field.

Overview

- NACCHO will provide **up to \$38,000** to approximately 4 syringe services programs (SSPs) to support the evaluation of smoking supplies distribution programs
- Funding must be spent on evaluation, not implementation (funds cannot be used to purchase smoking supplies)
- Activities can include:
 - Analyzing existing program data
 - Collecting and analyzing new data (e.g., through surveys, focus groups)

Timeline

- Applications due: October 13, 2023, at 11:59 PM PT
- Notification of Award: November 3, 2023
- Contract/project start date: December 1, 2023
- Contract/project end date: June 30, 2024

Goals

- Primary goal: Evaluate the distribution of smoking supplies as a harm reduction strategy for SSPs
- Secondary goal: Identify promising models and practices related to the distribution of smoking supplies

Goals

- Primary goal: Evaluate the distribution of smoking supplies as a harm reduction strategy for SSPs
- Secondary goal: Identify promising models and practices related to the distribution of smoking supplies

Tip: Projects can explore what the benefits are for participants (e.g., health outcomes) OR programs (e.g., reaching new participants)

Sample Evaluation Topics & Questions (1/3)

- Program reach and engagement
 - How has distributing smoking supplies affected our participant population?
 - Are we reaching a more diverse population?
- Injection drug use
 - How has distributing smoking supplies affected the frequency of injection or syringe sharing/reuse among participants?

See the RFA for a list of more than 20 sample evaluation topics and questions

Sample Evaluation Topics & Questions (2/3)

- Other drug use behaviors:
 - How has distributing smoking supplies affected sharing of smoking supplies among participants?
- Health outcomes:
 - How has distributing smoking supplies affected health outcomes among participants (e.g., reports of overdose, wounds, infectious diseases)?

See the RFA for a list of more than 20 sample evaluation topics and questions

Sample Evaluation Topics & Questions (3/3)

- Promising models and practices / Opportunities for program improvement
 - What supplies do our participants prefer?
 - How did participants hear about safer smoking supplies? / How did participants hear about our smoking supplies program?

Tip: You can propose multiple goals/evaluation questions – if you can realistically address them within the project period

Evaluation Priorities

- Applicants can propose their own evaluation questions, but preference will be given to applications that assess:
 - How distributing smoking supplies advances **health equity** (e.g., if the SSP is able to better reach populations such as Black, Indigenous, and other people of color or young people who use drugs); and/or
 - The **prevention of infectious diseases and overdose** (including if the distribution of smoking supplies reduces injection drug use)

Activities

- Activities can include:
 - Analysis of existing program data (e.g., before and after implementing smoking supplies)
 - Collection and analysis of new data (e.g., through surveys, focus groups with program participants)

Deliverables

- Deliverables will be finalized in collaboration with grantees as part of the contracting process but will include:
 - Participation in calls (with NACCHO, other grantees)
 - Evaluation plan
 - Final project report highlighting findings
 - Dissemination materials

Eligibility

Applicants must:

- **Org Type:** Nonprofit or governmental, e.g., health department, community-based org, healthcare clinic
- **Services:** Must already provide syringes and smoking supplies (at minimum, pipes)
- **Contracting Terms:** Have an active registration with SAM.gov and be able to meet NACCHO's contracting terms

Use of Funding

- Funds are for evaluation not implementation, and **cannot be used to purchase pipes, or other harm reduction supplies**
- Examples of how funding can be used include:
 - Staff time spent on data collection, analysis, evaluation, or dissemination
 - Modest incentives for PWUD participating in data collection
 - Contracts for data analysis, evaluation, or visualization support
 - Equipment
 - Graphic design and printing (e.g., of dissemination materials)
 - Indirect and fringe benefit costs

Additional information on allowable expenses can be found in the Budget Guidance.

Selection Criteria

- **Appropriateness of Organization, Program, and Population (20 points)**
 - Organization mission and operations
 - Population served
 - Volume and nature of smoking supplies program
- **Appropriateness & Feasibility of Evaluation (30 points)**
 - Methods
 - Data (quality/accuracy, quantity)
 - Feasibility within project period / based on capacity

Application Instructions

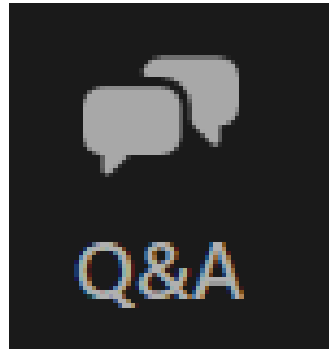
- Complete Application Form
- Complete Budget, Budget Narrative
 - *If applicable, complete Gift Card & Incentive Approval Form*
- Complete Contracting Package
- Submit to Kat Kelley (kkelley@naccho.org) by 11:59 PM PT on October 13, 2023

Application Form

- Org overview: mission, jurisdiction, budget, services, staff
- Overview of smoking supplies program: supplies/services, history, structure, volume
- Need for smoking supplies in your jurisdiction / among program participants
- Evaluation plan: goals, methods, timeline
- Challenges & needs
- Engagement & equity

Questions?

Click



to submit a question



Pre-Submitted Questions

Do I have to be an SSP to apply?

Yes, your organization needs to be an SSP, defined as any organization that distributes syringes for harm reduction purposes. Please see the eligibility section of the RFA for more details.



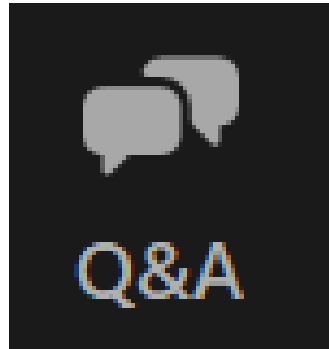
Pre-Submitted Questions

Do I have to distribute smoking supplies to be eligible for this opportunities?

Yes, you must already be distributing smoking supplies, as this is an evaluation opportunity and not an implementation opportunity. Please see the eligibility section of the RFA for more details.

Questions?

Click



to submit a question

References

1. Prangnell, A., Dong, H., Daly, P., Milloy, M. J., Kerr, T., & Hayashi, K. (2017). Declining rates of health problems associated with crack smoking during the expansion of crack pipe distribution in Vancouver, Canada. *BMC Public Health*, 17(1), 163. <https://doi.org/10.1186/s12889-017-4099-9>
2. Macías, J., Palacios, R. B., Claro, E., Vargas, J., Vergara, S., Mira, J. A., Merchante, N., Corzo, J. E., & Pineda, J. A. (2008). High prevalence of hepatitis C virus infection among noninjecting drug users: association with sharing the inhalation implements of crack. *Liver International: Official Journal of the International Association for the Study of the Liver*, 28(6), 781–786. <https://doi.org/10.1111/j.1478-3231.2008.01688.x>
3. Tortu, S., McMahon, J. M., Pouget, E. R., & Hamid, R. (2004). Sharing of noninjection drug-use implements as a risk factor for hepatitis C. *Substance Use & Misuse*, 39(2), 211–224. <https://doi.org/10.1081/ja-120028488>
4. Fitzpatrick, T., McMahan, V. M., Frank, N. D., Glick, S. N., Violette, L. R., Davis, S., & Jama, S. (2022). Heroin pipe distribution to reduce high-risk drug consumption behaviors among people who use heroin: a pilot quasi-experimental study. *Harm Reduction Journal*, 19(1), 103. <https://doi.org/10.1186/s12954-022-00685-7>
5. Leonard, L., DeRubeis, E., Pelude, L., Medd, E., Birkett, N., & Seto, J. (2008). "I inject less as I have easier access to pipes": injecting, and sharing of crack-smoking materials, decline as safer crack-smoking resources are distributed. *The International Journal on Drug Policy*, 19(3), 255–264. <https://doi.org/10.1016/j.drugpo.2007.02.008>
6. Kaye, S., & Darke, S. (2004). Non-fatal cocaine overdose among injecting and non-injecting cocaine users in Sydney, Australia. *Addiction (Abingdon, England)*, 99(10), 1315–1322. <https://doi.org/10.1111/j.1360-0443.2004.00875.x>
7. Friedman, J., & Shover, C. L. (2023). Charting the fourth wave: Geographic, temporal, race/ethnicity and demographic trends in polysubstance fentanyl overdose deaths in the United States, 2010-2021. *Addiction (Abingdon, England)*, 10.1111/add.16318. Advance online publication. <https://doi.org/10.1111/add.16318>

Thank you!

Contact Kat (kkelley@naccho.org) with any questions