



North Carolina Syringe Exchange Program – Storm Project

Summary of Qualitative Interviews • August 2019

In North Carolina, syringe exchange programs (SEPs) provide unused sterile syringes and safe disposal for used syringes, free of charge and on an as-needed basis.ⁱ They also provide other supplies for safer use and infection prevention, connection to medical and social services, and opioid overdose prevention and response resources, including naloxone. Between July 2018 and June 2019, 30 active SEPs provided services in 42 counties; residents of more than 71 NC counties received SEP services during that period.

IMPORTANCE OF MAINTAINING OPERATIONS DURING INCLEMENT WEATHER

Because SEPs provide valuable services to a variety of clients, maintaining operations during inclement weather is important for public health and safety. North Carolina has a hurricane storm season of six months, with the potential to affect all 100 counties in the state.ⁱⁱ Over the past 10 years, there have been an average of 2.27 storms per year.ⁱⁱⁱ There are 14 projected named storms, six hurricanes, and three major hurricanes predicted for the 2019 Atlantic Hurricane Season.^{iv} The death toll due to hurricanes in North Carolina last year (2018) after Hurricane Florence was

15 fatalities.^v Storms affect infrastructure, often closing public services, roads, and other vital components of functioning society. Because North Carolina is affected so drastically by storms and severe inclement weather, the population accessing public services are often disproportionately affected as well. Syringe exchange program participants, who typically have limited access to mainstream healthcare, are included in this. To gain a better understanding of how SEP operations and services are affected by storms, and to understand how they prepare for the annual storm season, the North Carolina Division of Public Health's Injury and Violence

Prevention Branch (NC DPH IVPB) conducted interviews with five SEP managers. Questions asked about preparing for the inclement weather, communicating with participants and employees, and policies and best practices for maintaining operations and providing services. Interviews were approximately 45-minutes each, conducted over the phone and through e-mail correspondence, and took place during the months of March and June 2019. The first phase

of interviews focused on pre-storm activities at the SEP. The second and third phases focused on collecting information regarding activities occurring during inclement weather and assessing what is needed for the upcoming 2019 Atlantic hurricane season. Qualitative data were collected, transcribed, and coded for themes. The following is a summary of themes revealed via interviews and a list of recommended practices for SEPs when preparing for storm season.

SUMMARY OF THEMES

PREFERRED COMMUNICATION METHOD

When asked about methods of contacting SEP participants in the event of inclement weather, respondents said they used the following communication channels: local news channels, SEP websites and social media, word of mouth, signs posted at the exchange, and phone calls. While most respondents said they used a variety of methods, one theme emerged on the difficulty of reaching SEP participants via social media. When probed, respondents said that some participants at SEPs tended not to have regular access to devices connected to the Internet, or that services were disconnected due to weather, and therefore word of mouth and signs at the physical location were necessary.

INCLEMENT WEATHER POLICY

IVPB staff asked whether the SEP host organization had a formal inclement weather policy. The majority of respondents said they did not and left the decision about whether or not to travel to work up to each individual employee. Respondents said they continued to work regardless of the weather, and one respondent said she asked volunteers to stay home.

IDENTIFYING SERIOUS CONCERNS

When asked to identify some of the more serious concerns SEPs face during inclement weather, the topic of MAT emerged. Each of the five SEP managers reported challenges securing medication-assisted treatment (MAT) access as a reoccurring issue during inclement weather. The topic of “guest dosing,” whereby patients may secure medication at an alternate facility rather than their primary facility, arose during interviews. A lack of communication between SEPs and MAT clinics regarding

closings and guest dosing requirements were the most commonly mentioned barriers to access.

Another serious concern stated by respondents was a lack of opioid overdose reversal medication (naloxone), both within SEPs and on-site for other typical emergency service providers, such as emergency medical services and local emergency shelters. Respondents reported that they were contacted by these organizations requesting naloxone, which reflects a greater need for overdose reversal medications within the community. In addition to naloxone, SEP managers reported a need for supplies such as food, potable water, and clothing. One participating SEP reported people who use drugs (PWUD) being turned away from emergency shelters, MAT clinics, ED/hospitals, and churches due to their opioid-dependent status. One interviewee commented, “there was no support for people who use drugs in our community [during the storm].”

DISTAL EFFECTS OF INCLEMENT WEATHER

Lastly, respondents expressed concerns about the distal effect of inclement weather on PWUD. They worry about increased overdose deaths because of changes to illicit drug supply routes due to closed roads and evacuations, which may cause PWUD to turn to unfamiliar or unsafe suppliers. Another concern was the impact of closed roads and infrastructure on the access to naloxone and basic sterile injection supplies, including syringes. Communities isolated during severe weather events without sufficient access to syringes and injection supplies raises the possibility of weather-associated outbreaks of infections and diseases spread through shared and reused supplies.

RECOMMENDED PRACTICES

Based upon the information collected during these interviews, IVPB recommends the following measures. **To effectively plan for program operations and services during severe weather, SEPs should:**



Use multiple methods of communication to contact participants before inclement weather (social media, website, local news, phone). Begin communicating to participants early and share relevant resources.



Develop an established HR policy for employees and volunteers to reduce confusion during severe weather and identify key roles. Establish points of contact with partner organizations to effectively coordinate during events.



See the [NC Safer Syringe Initiative website](#) and [NaloxoneSaves.org](#) to compile a list of syringe exchanges and naloxone sources to share with participants and partner organizations. In case of emergency, always call 911.



Start developing relationships and opening lines of communication with local MAT clinics to receive information about emergency closures. Compile a list of resources for guest dosing at alternative clinics and share information for possible guest dosing locations with program information during events.



To avoid confusion and ensure public health and safety, SEPs should not:

- Assume every participant has access to the Internet and/or social media. Use informal means of communication such as signs at the physical program location and word of mouth to convey pertinent program information, such as amended hours or alternate locations.
- Assume local emergency shelters will accept opioid-dependent participants. Network prior to storms and other events to find those that will accommodate PWUD.
- Hesitate to encourage peer-to-peer distribution and should provide additional supplies to program participants in advance of inclement weather. PWUD are often an SEP's greatest asset for maintaining services and sharing information during inclement weather.

Please visit IVPB's website for further information on Syringe Exchange Programs in your region. If you have any questions, please contact us at SyringeExchangeNC@dhhs.nc.gov.



Ensure the SEP has sufficient quantities of sterile syringes, injection supplies, and naloxone prior to inclement weather. Start asking participants about additional supplies in advance of the storm(s) to reduce last-minute burden on programs.



Network with other SEPs prior to inclement weather to identify potential sources of additional or back-up supplies. Consider travel routes and transportation methods in the event of road or airport closures.



Emergency supplies of naloxone should be provided to SEPs and other emergency service providers as quickly as possible during storm preparation/response in anticipation of transportation issues.



Compile a list of PWUD-welcoming hospitals, pharmacies, and emergency shelters to distribute with program information. Encourage partner organizations to develop their own policies for serving PWUD and other vulnerable populations during severe inclement weather and other events when services are otherwise compromised.



Reach out to community-based organizations (CBOs) and other emergency service providers to partner and provide co-located resources during inclement weather, such as food, water and clothing distribution.

i North Carolina Safer Syringe Initiative, <https://www.ncdhhs.gov/divisions/public-health/north-carolina-safer-syringe-initiative/syringe-exchange-faqs>
 ii North Carolina Climate Office, <https://climate.ncsu.edu/climate/hurricanes/introduction>
 iii North Carolina Climate Office, <https://climate.ncsu.edu/climate/hurricanes/statistics?state=NC>
 iv Forecast of Atlantic Seasonal Hurricane Activity and Landfall Strike Probability for 2019, <https://tropical.colostate.edu/media/sites/111/2019/07/2019-07.pdf>
 v National Hurricane Center Tropical Cyclone Report, https://www.nhc.noaa.gov/data/tcr/AL062018_Florence.pdf

