



Tennessee Annual Syringe Services Program Report, 2023



OVERVIEW OF SYRINGE SERVICES PROGRAMS (SSP)



Since the legalization of syringe services programs (SSPs) in May 2017,¹ the Tennessee Department of Health (TDH) has supported the expansion of SSPs and related harm reduction efforts across Tennessee. SSPs are an evidence-based public health strategy. Thirty years of evidence demonstrate effectiveness in infectious disease prevention (namely HIV and Hepatitis C), overdose prevention and reversals, and linkage to treatment and supportive services for people who may not be able to access them otherwise. Visit the links below to learn more about these efforts in Tennessee and evidence that supports the implementation and expansion of syringe services.

WHAT DOES THIS REPORT COVER?

The following report provides an overview of SSP activities across Tennessee during calendar year 2023, including where they were located, who they served, and the services provided to clients. This annual report helps TDH and partners assess who is accessing these programs as well as the scope of services provided. TDH uses the annual report data to better support agencies in delivering high-quality and comprehensive services to those with the greatest need across Tennessee.

This report includes aggregated quantitative and qualitative data, collected through an electronic reporting system, quarterly check-in calls, and site visits. All data is self-reported by agencies and their participants which may underestimate the full scope of participants served or services provided at SSPs.

WHERE CAN I LEARN MORE?

[TN SSP Website](#)



[TN SSP Laws](#)



[TN Harm Reduction Hub](#)



[CDC SSP Website](#)



[SAMHSA Harm Reduction Website](#)



2023 REPORT HIGHLIGHTS

Expansion



16 new locations



2 new agencies



4 new counties

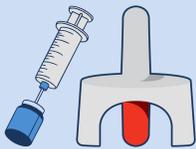
Exchange Rate

1 : 1.1 exchange rate



For every one syringe returned, 1.1 syringes are distributed.

Naloxone



Over **84,000** naloxone kits distributed

HIV Testing



Over **2,800** rapid HIV tests conducted

HCV Testing



Over **1,600** HCV antibody tests conducted



Over **770** SSP participants connected to mental health services



Over **1,200** SSP participants connected to substance use disorder treatment



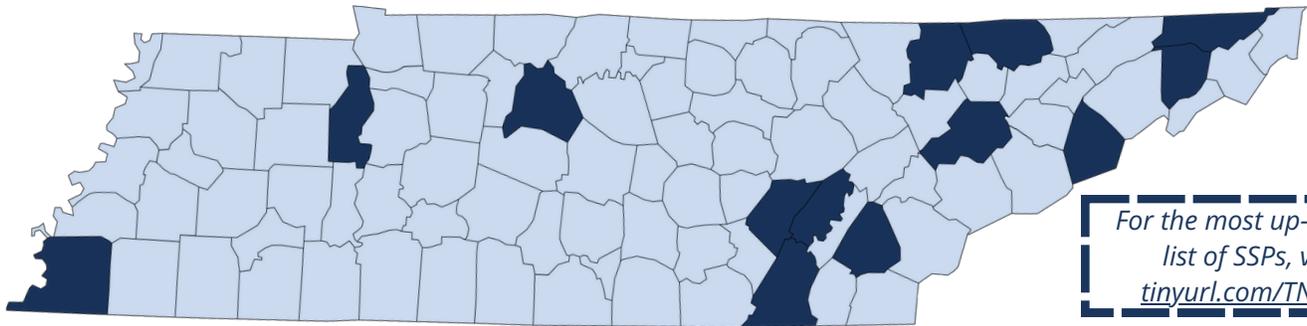
Over **3,100** SSP participants referred to PrEP services



“One of our long-term clients has entered SUD [substance use disorder] treatment, and his partner is going as soon as he gets out.”

SSP Staff Member

IN 2023, 14 AGENCIES WITH 26 SITES OPERATED ACROSS 13 COUNTIES

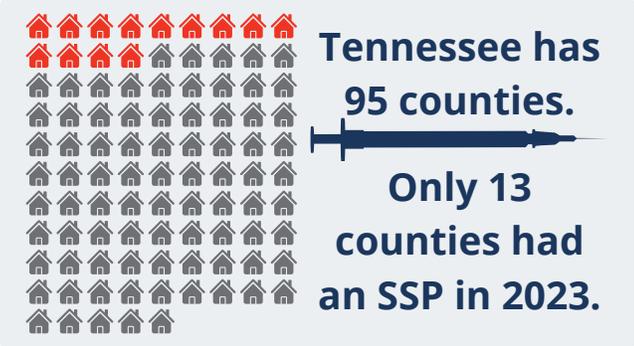


A total of **32 SSP locations** were approved to operate by the end of 2023. Some sites were approved during 2023, but did not operate during 2023 and were excluded from this report. Therefore, this report includes data from 14 agencies across 26 sites (some agencies operate at more than one location). Additionally, some agencies and sites were approved in the last half of the year and their data does not represent a full year of operations.

- 100%** increase in approved SSP locations from 2022 from 16 locations to 32
- 2 new agencies** approved in 2023
- 4 new counties** approved in 2023

Although SSPs have expanded across Tennessee, there are gaps in service access, especially in rural Tennessee. Major challenges related to the expansion of syringe services include **limitations and restrictions on harm reduction funding, state zoning requirements for the delivery of services, and community stigma.**

- Funding limitations** have delayed the establishment of new SSP sites, especially rural counties that have less access to grant opportunities and other financial resources.
- SSPs are limited on where they can operate** per [TN Code Ann. § 68-1-136\(g\)](#). This restricts SSPs from providing response operations and meeting people where they are which often impacts services in high-need areas.
- Stigma and apprehension from community** impacted the ability of SSPs to identify new locations and partners to expand their service reach which can impact the ability to reach high-priority counties.



Despite challenges, SSPs in Tennessee continue to build and strengthen partnerships to improve the health and wellness of people impacted by substance use and their communities.

SSP SERVICES INCREASED IN 2023

56,214 total visits
to SSPs in 2023

*includes returning participants;
a 9% increase from 2022*



**31,029 individual
participants**

visited an SSP in 2023



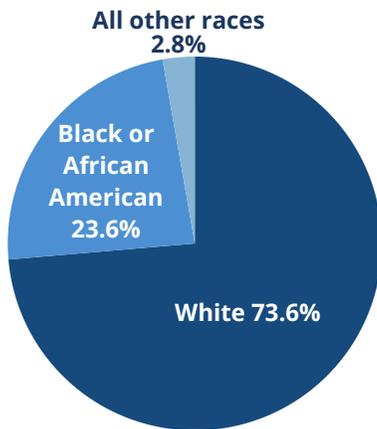
**5,321 new
participants**

enrolled in an SSP in 2023
a 38% increase from 2022

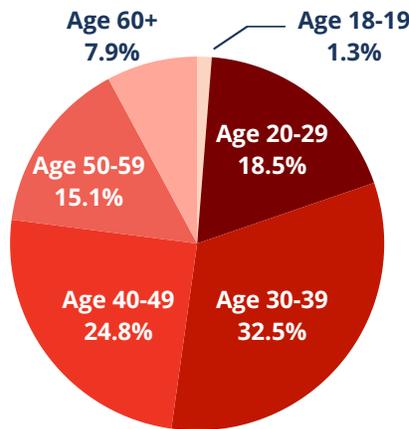


SSPs also often participate in community outreach events to distribute naloxone, increase awareness of and access to their services, conduct infectious disease testing, and provide education to reduce overdose and other health consequences related to drug use. For example, in 2023, a single SSP reached over 800 individual community members through outreach events.

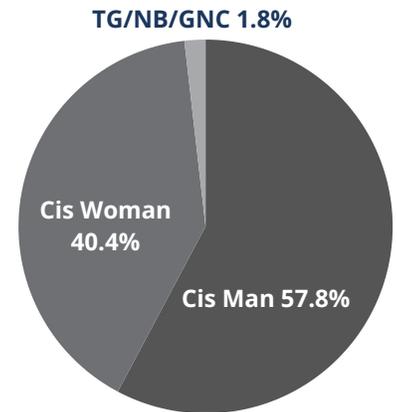
NEW PARTICIPANT DEMOGRAPHICS IN 2023



Of new participants in 2023 who reported race (n = 4737), **74% identified as White** and **24% identified as Black or African American**. The remaining participants identified as Asian, Native Hawaiian/Pacific Islander, American Indian/Alaskan Native or Multi-Racial (noted as "All other races").



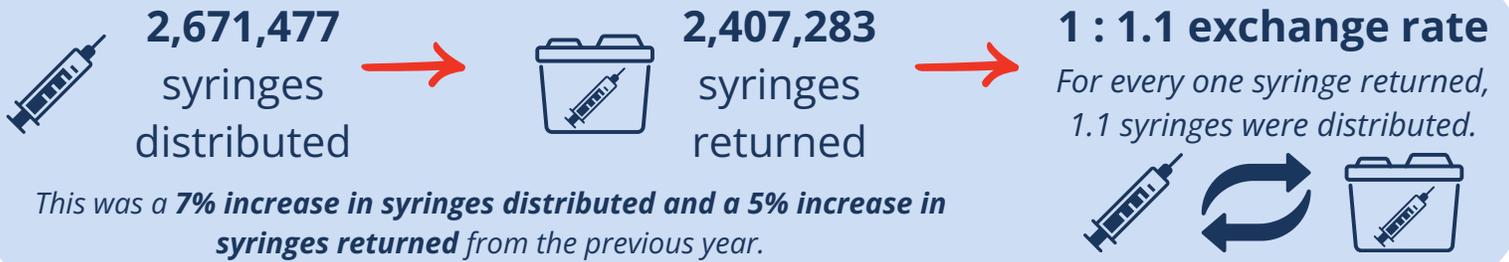
Of new participants in 2023 who reported age (n = 4707), the **highest percentage of participants were ages 30-39 (32%)**, followed by **ages 40-49 (25%)** and **ages 20-29 (18%)**.



Of new participants in 2023 who reported gender (n = 4698), **58% identified as a cisgender man** and **40% identified as a cisgender woman**. The remaining **2% identified as transgender (TG), non-binary (NB), or gender non-conforming (GNC)**.

An important pillar of Harm Reduction is to provide services with as few barriers as possible, and this can include confidential or anonymous services.² SSPs collect only the data necessary for certain services, meaning the above demographic data may not be representative of all participants who received services during 2023. Additionally, some participants may want to report some, but not all, of their demographic information, such as reporting their age but not their race.

SSPs PROVIDE SYRINGE EXCHANGE & MORE

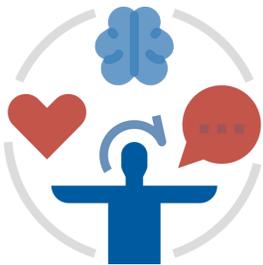


Per Tenn. Code Ann. § 68-1-136, SSP agencies should strive for a one-to-one syringe exchange but should provide supplies "in quantities sufficient to ensure that... supplies are not share or reused." ¹

SSPs HELP REDUCE SYRINGE LITTER IN THE COMMUNITY WHICH HELPS PREVENT NEEDLESTICK INJURIES



CHANGES IN DRUG USE BEHAVIORS



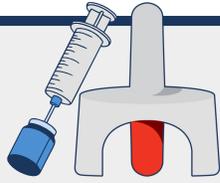
In a recent CDC report, the percentage of overdose deaths with evidence of smoking increased 73.7%, and the percentage with evidence of injection decreased 29%.^{4,5} Similar changes were observed in all U.S. regions. Therefore, the CDC has recommended strengthening and expanding public health services to address overdose risk with smoking and other non-injection routes to further reduce deaths.

TN SSPs noted that they have seen positive behavior change with participants switching to safer substance use practices, such as not injecting drugs. Being able to provide other safer use supplies beyond injection supplies was mentioned as a potential strategy to increase reach of their services and engage more people who use drugs who may not inject drugs. This increase could lead to providing direct services and linkage to substance use treatment for those currently not being reached.

Legal and funding limitations were mentioned as barriers to providing safer use supplies.

SSPs PROVIDE LIFE-SAVING OVERDOSE REVERSAL MEDICATION

In partnership with the Tennessee Department of Mental Health and Substance Abuse Services (TDMHSAS),⁶ SSPs in Tennessee receive in-kind overdose reversal medications, such as naloxone, to distribute to their participants. Additionally, TDMHSAS provides overdose prevention trainings, as well as education on emerging substances, fentanyl, and stimulants.



84,591 overdose reversal kits distributed with 13,292 reported overdose reversals.

This distribution is a 46% increase from 2022.

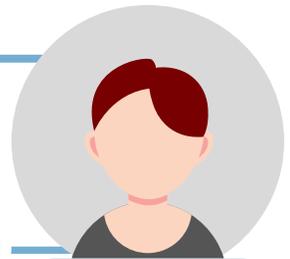
TDMHSAS offers different forms of overdose reversal medication, including 4 and 8 mg formulations.

Since 2022, SSPs have distributed fentanyl test strips (FTS) in partnership with TDMHSAS. The purpose of FTS is to inform people about the presence of fentanyl in drug samples in order to take the proper steps to prevent overdose and other unwanted harms. According to a recent report from TDMHSAS, almost 80% of survey respondents noted at least one behavior change after using an FTS on their sample.⁷

“

You're saving lives. Thank you. From the bottom of my heart, thank you. My wife was dead. Blue. Your Narcan gave me my wife back.

”



SSP Participant

SSPs PROVIDE INFECTIOUS DISEASE TESTING

HCV and HIV can be transmitted through the sharing of needles, syringes, and other supplies used to inject drugs. Access to sterile supplies and infectious disease testing is key to preventing HIV/HCV transmission. SSPs are associated with an estimated 50% reduction in HIV and HCV infections and further reduction in transmission when combined with substance use treatment. A majority of SSPs in Tennessee provide point-of-care HIV and HCV testing as well as linkage to infectious disease care.⁸⁻¹⁰



HIV

2,846 rapid HIV tests conducted

in 2023

a 69% increase from 2022

SSPs refer participants living with HIV to HIV care and other supportive services.



HCV

1,605 HCV antibody tests conducted

in 2023

a 39% increase from 2022

SSPs refer participants to confirmatory testing and HCV treatment.

SSPs REFER TO VARIOUS MEDICAL AND SOCIAL SERVICES

Social Supports

3,312 referrals

The most common services included:

- housing services
- food and clothing
- transportation support
- employment services
- support obtaining health insurance
- financial support services

Other support services included:

- identification cards
- childcare services
- animal/pet services
- bicycle repair services

Additionally, participants were provided or connected to other medical services including dental, eye, and wound care.



Pre-Exposure Prophylaxis (PrEP)

3,104 referrals

PrEP is a medication that prevents the acquisition of HIV. PrEP referrals include identifying a provider or navigator that meets the participant's needs then coordinating access to care.



Naloxone

493 referrals

Naloxone referrals typically occur when there are supply chain issues or if a participant prefers a different formulation than the SSP offers.



Mental Health

771 referrals

This includes outpatient counseling and inpatient admissions.



Substance Use Disorder (SUD) Treatment

1,234 referrals

This includes inpatient and outpatient treatment services.

SSPs offer referrals to substance use treatment. Research has found that new SSP users are...¹¹

5x
more likely to enter drug treatment

3x
more likely to stop using drugs



“Multiple participants who completed treatment programs stopped by and wanted to let us know that they were doing well. It's really nice when people come back to let us know how they're doing, and it's a testament to the positive relationships that we build with participants.”

SSP Staff Member

XYLAZINE

In 2023, there was heightened concern from SSP staff and participants regarding an emerging substance in the drug supply known as xylazine. Xylazine, also known as “tranq” or “tranq dope,” is a non-opioid sedative or tranquilizer. Xylazine is especially dangerous when combined with opioids like fentanyl.^{12,13}

Xylazine is increasingly found in the Tennessee drug supply and linked to overdose deaths and severe wounds. Wounds can appear anywhere on the body, regardless of where or how the drug was used.

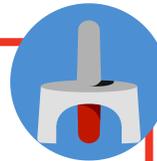
XYLAZINE CAN CAUSE

- sedation
- difficulty breathing
- severe wounds
- slowed heart rate
- severe withdrawal symptoms



Overdose Risk

Though xylazine does not fully respond to naloxone, **always use naloxone and call 911** if you suspect an overdose since an opioid may be involved and naloxone may provide some benefit to the toxic effects of xylazine.



It is also important to give rescue breaths to help restore breathing. Continue breaths until they are at 12 breaths per minute. If someone is breathing on their own, further naloxone is not needed.



Scan to learn more about xylazine

WOUND CARE



Due to the heightened concern around the emerging substance known as xylazine, and seeing an increase in wounds and wound severity among SSP participants, some SSPs implemented onsite medical providers and added basic wound care to their services.

“**SSP basic wound care has helped participants avoid going to the ER or avoid more serious complications when they do access higher level medical care.**”



SSP Staff Member

PROGRAMS ACROSS TN COLLABORATE TO SUPPORT SSPs

Programs across the Tennessee Department of Health (TDH) and the Department of Mental Health and Substance Abuse Services (TDMHSAS) collaborate to provide comprehensive support to SSPs in TN.

- TDH Syndemic Coordination Program
- TDH HIV/Sexually Transmitted Infections/Viral Hepatitis Section
- TDH Overdose Response Coordination Office
- TDH Office of Informatics and Analytics
- TDMHSAS State Opioid Response
- Other partners
- And more!



These programs provide resources, personnel support, and data support to our SSPs. For example, the TDH HIV/STI/VH program provides funding to some SSPs, HIV & HCV trainings, and HCV test kits. TDMHSAS provides overdose reversal medication, educational and overdose response trainings, and drug checking test strips.

ACKNOWLEDGEMENTS

Thank you to our SSPs who provide much-needed services to Tennesseans across the state. Your time, voices, and expertise are deeply appreciated.

Additionally, thank you to our partners – including but not limited to the Tennessee Department of Mental Health and Substance Abuse Services, TDH HIV/STI/Viral Hepatitis Section, TDH Overdose Coordination Response Office, TDH Office of Informatics and Analytics, and United Way of Greater Nashville – who also support SSPs through funding, supplies, capacity-building assistance, and trainings.

Suggested Citation

Syndemic Coordination Program (2024). *Tennessee Annual Syringe Services Program Report, 2023*. Tennessee Department of Health HIV/STI/Viral Hepatitis Section.

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