

## DHAS EDITS – July 7, 2009

### CONSENSUS OPINION:

In response to the DAS request to enter data via the NJSAMs, the syringe access programs (SAP) are unclear as to what purpose registering clients with NJSAMS would serve, how would it be a benefit to the client. Even minimal data entry would cause an undo hardship for the SAPs. The process described by DAS, as having all interested SAP participants referred to the NETI regardless of capacity, has a defined cost to the client in travel and time but there is no apparent benefit for the individual. A waiting list of SAP referrals with priority status and a defined mechanism to access NETI and the voucher system would be such a benefit. We feel that the benefit would serve both DAS and the individual client.

The SAPs feel it is imperative that they do not mislead participants to think that drug treatment is immediately available when it is not, this would lend itself to developing hostile feelings toward the SAP and the system in general while possibly destroying the SAP's credibility in the community. We believe that SAPs have cooperated in every way possible by attending NETI meetings, data gathering and participating in the evaluation processes attached to the legislation. Let us not forget that without governmental support it falls solely on the SAPs to find the necessary funding to run the programs and foundation grants are tenuous at best. Additionally, we believe that the need for treatment has already been established as evidence by surpassing the current capacity

The SAPs have always contended that there is a need to have a case manager working for the SAPs with no ties to drug treatment. This case manager who would address all life areas, drug treatment would then be one referral in this multi-focus approach. The case manager would not only refer and track SAP clients to drug treatment but also to housing, prenatal care, medical care, HIV testing, HCV testing, HBV vaccine, and all the other services many of the clients need so desperately. The services listed are among those most often requested by the SAP participants. SAP workers must remain focused on our primary goal on "one shot, one syringe," however, with adequate funding; the SAPs would provide quality case management that would improve the overall quality of life for participants regardless of their motivation to access drug treatment.

The SAPs will remain focused on their primary goal of syringe exchange services to IDUs in the five NJ municipalities, and is deeply rooted in the basic principles of harm reduction.

### Recommendations:

- DAS reports that NETI programs have met methadone capacity creating a need to institute a bona fide and managed waiting list that would prioritize SAP participants.
- Provide funding for case management as a support service in the SAP with focus on all life areas with immediate attention paid to basic needs of an IDU.

- Commit to harm reduction as the primary philosophy for all services that wrap around the SAPs.