

Syringe Service Programs in Maine

2024 Annual Report

11/1/2023 to 10/31/2024

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Maine Department of Health and Human Services Maine Center for Disease Control and Prevention

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Executive Summary

Maine's Department of Health and Human Services – Maine Center for Disease Control and Prevention (Maine CDC) is authorized to certify hypodermic apparatus exchange programs in accordance to adopted rules that must require tracking of the numbers of hypodermic apparatuses distributed and collected and include procedures for safe syringe disposal and complaint investigations. Maine CDC is mandated to submit an annual report on certified hypodermic apparatus exchange programs, also referred to as syringe service programs (SSPs). (22 M.R.S. §1341). This 2024 annual report includes information about Maine's 10 certified SSPs, operating 21 SSP sites, including enrollment and utilization data and referral services.

The reporting period for this report is November 1, 2023, through October 31, 2024. SSPs reported close to 2,000 enrollments during this reporting period, more than 31,000 exchange events across SSPs and more than 92,000 referrals to services such medical care, clinics offering testing for sexually transmitted diseases (STD), HIV and hepatitis, substance use treatment, peer support, recovery coaches, overdose aftercare, food assistance, wound care, naloxone distribution, housing, transportation, health insurance benefits, mental health services, and other social supports. The largest number of referrals in 2024 (25,891) categorically related to basic needs, general assistance, food, housing, and rental assistance.

A Brief Overview of Syringe Service Programs in Maine

During the reporting period, Maine had 10 certified Syringe Service Program (SSP) sites operating in 21 locations in 10 of Maine's 16 counties in the communities of Augusta, Bangor, Calais, Ellsworth, Farmington, Lewiston, Machias, Milo, Portland, Rumford, Sanford, Strong, Waterville, and Westbrook. These 21 locations are operated by ten organizations: City of Portland, Church of Safe Injection, Commonspace, Health Equity Alliance, Maine Access Points, MaineGeneral Medical Center, MaineHealth Franklin County Syringe Exchange, Needlepoint Sanctuary, Spurwink (previously TriCounty Mental Health Services), and Wabanaki Public Health and Wellness. The location in Portland, operated by the City of Portland, is Maine's first, opening in 1998. Currently, there are 21 operating certified sites in total in Maine. All certified SSPs are required to submit service data to Maine CDC on a monthly basis. This report summarizes data submitted by certified and operating SSP sites operating during the reporting period of November 1, 2023, through October 31, 2024.

2024 Highlights

In 2024, Maine's SSPs:

- Collected and disposed of 2,487,888 used syringes.
- Distributed 3,188,444 new syringes.
- Enrolled 15,949 participants, collectively.

- Enrolled 1,999 new participants, collectively.
- Made 92,983 referrals to services such medical care, STD clinics, HIV and hepatitis
 testing, substance use treatment, peer support, recovery coaches, overdose aftercare,
 food assistance, wound care, naloxone distribution, housing, transportation, health
 insurance benefits, mental health services, and other social supports.
- Conducted 526 HIV tests with syringe service program participants.
- Conducted 346 Hepatitis C Virus (HCV) tests with program participants.
- Provided naloxone (intramuscular and nasal spray) at 13,688 encounters.
- Distributed 16,439 xylazine test kits.
- Distributed 21,244 fentanyl test kits.
- Distributed 6,710 sharps containers (funded by SOR) of various sizes to date this year.

Rules, Policies, and Initiatives

Maine CDC, part of the Department of Health and Human Services (DHHS), is authorized by 22 M.R.S. c. 252-A, §1341(1) to certify hypodermic apparatus exchange programs, also referred to as Syringe Service Programs, to facilitate the prevention of bloodborne pathogens such as HIV (human immunodeficiency virus) and viral hepatitis. Pursuant to 22 M.R.S. §1341(3), this report reflects the syringe service activities conducted by 21 certified program sites operating in Maine for the period from November 1, 2023, to October 31, 2024.

Public Law 1997 chapter 340 established the authority for DHHS to certify Syringe Service Programs (SSP) that meet the requirements established by statute and specified in adopted program rules (10-144 CMR chapter 252). The statute was further amended when the 127th Maine State Legislature passed LD 1552, *An Act To Reduce Morbidity and Mortality Related to Injection Drugs* (Public Law 2015 chapter 507), directing the Maine CDC to allocate State funds to new and existing SSPs, but no funds were appropriated to support this mandate. Public Law 2017 chapter 464, *An Act To Reduce the Cost of Care Resulting from Blood-borne Infectious Diseases*, introduced as LD 1717, was enacted by the 128th Maine State Legislature, providing funds to support hypodermic apparatus exchange programs in the State.

In July of 2021, Governor Mills repealed statutory provisions and signed into law amendments that decriminalized the possession and furnishing of syringes with residual amounts of any scheduled drug and drug testing equipment. (Public Law 2021 chapter 434, introduced as LD 994, *An Act To Promote Public Health by Eliminating Criminal Penalties for Possession of Hypodermic Apparatuses*). It further removed language considering syringes as 'drug paraphernalia' (17- A MRS c. 434, §1106, §1107, §1110, and §1111(5)). Those changes went into effect on October 18, 2021.

In early fall 2021, through advocacy led by syringe service partners, Maine updated its *Syringe Services Programs Rule* (10-144 CMR chapter 252), formerly *Rules Governing the*

Implementation of Hypodermic Apparatus Exchange Programs. In September 2022, rule amendments were implemented by emergency rulemaking, which was followed by the adoption of routine technical rule changes in November 2022 (5 MRS §8054). These rule amendments supported harm reduction practices by removing stigmatizing language and easing burdensome administrative directives. These rules allow certified SSPs to exchange syringes via a 1:1+ strategy that better supports SSP program enrollees. If a client visits an SSP with no syringes to return, they can receive up to 100 syringes as needed or at the site's discretion and considering its inventory. This effectively removes barriers associated with a strict 1:1 exchange policy and moves Maine closer to a needs-based exchange. Needs-based exchange, which imposes no restrictions on the number of syringes a client can receive, is considered best practice by US CDC as it decreases injection risk behaviors and reduces transmission of bloodborne pathogens by increasing accessibility of sterile syringes.¹

In December of 2019, the Governor's Office of Policy Innovation and the Future released the *Opioid Response Strategic Plan* with the goal of "reducing the negative health and economic impacts of substance use disorder and opioid use disorder on individuals, families, and communities in Maine". Priority G includes increased support to enhance and build capacity of new syringe service partners. In 2023, Maine's Opioid Response 2023-2025 Strategic Action Plan took effect. This Strategic Action Plan includes "Harm Reduction" as a focus area. Strategies within this focus area includes "Strategy 20: Ensure the availability of harm reduction resources and referrals to treatment and recovery supports for individuals at high-risk of overdose" which incorporates the objective to "expand SSPs through the licensing of additional Certified Syringe Service Providers and the use of mobile distribution and outreach, in both urban and rural areas." In addition to putting forth this comprehensive Opioid Response Strategic Plan, Governor Mills announced \$1 million to support the purchase and distribution of xylazine test strips.

In June 2023, Governor Mills signed into law *An Act to Support Public Health by Clarifying Authorized Activities Regarding Drug Checking*, introduced as LD 1745 and enacted as Public Law 2023 chapter 303. This bill addresses barriers of liability related to transportation and testing of drug samples and paraphernalia, and allows for the initiation of a drug checking pilot project to be conducted with 4 SSPs. The pilot is supported through funding from the Distribution of Harm Reduction Access in Rural Maine Areas Program and drug analysis

https://www.maine.gov/future/sites/maine.gov.future/files/inline-files/MaineOpioidResponse.StrategicActionPlan.FINAL .12.11.19.pdf

¹ Centers for Disease Control and Prevention. Needs-Based Distribution at Syringe Service Programs Fact Sheet.

² Maine Opioid Response Strategic Action Plan, 2019.

³ Maine Opioid Response 2023-2025 Strategic Action Plan, 2023.

https://www.maine.gov/future/sites/maine.gov.future/files/inline-files/GOPIF OpioidReport 2023.pdf

⁴ State of Maine Office of Governor. Governor Mills Announces Action to Address Growing Threat of Xylazine. July 2023.

 $[\]underline{https://www.maine.gov/governor/mills/news/governor-mills-announces-action-address-growing-threat-xylazine-\underline{2023-10-25}$

expertise at Colby College. This pilot program is in response to the urgent need for testing and drug checking due to increasingly dangerous substances in Maine's drug supply.

In July 2023, Governor Mills signed LD 1364 into law, a resolution which directed the Governor's Office of Policy Innovation and the Future to "convene a working group to study methods of preventing opioid overdose deaths by authorizing harm reduction health centers," also known as Overdose Prevention Centers (OPCs). (Public Law 2023 chapter 120). The working group consists of 12 members from state and local government agencies as well as representatives from the recovery and harm reduction communities. Their work has focused on addressing the questions: 1) could OPCs work in Maine; 2) what is likely to happen if OPCs are allowed and established; 3) what could be changed in Maine law to make OPCs possible and 4) what else do lawmakers need to consider as they decide if and how to proceed. The group is scheduled to report out their findings to the state legislature in early 2025.

In January 2024, a cluster of HIV was recognized among people living in Penobscot County. By October 31, 2024, a total of 14 people were identified as HIV and Hepatitis C Virus (HCV) coinfected and were confirmed to be associated with the cluster. Further investigation has revealed that the locus of the cluster is in a population of people who use drugs (PWUD), primarily among individuals who are also currently or recently unhoused. DHHS is working closely with Penobscot County healthcare and public health partners, including SSPs, to respond to the cluster and support persons affected to receive HIV and HCV testing, care, and treatment. The role of local SSPs has been critical in the response to support testing and outreach to detect HIV and HCV infection and support linking affected persons to prevention, care, and treatment services.

Funding Syringe Service Programs in Maine

Building upon success with funding from previous years, in January 2022, Maine CDC was awarded \$1,000,000 through the <u>Opioid Use Disorder Prevention and Treatment Fund</u> to support SSPs through June 30, 2023. In 2023, the Opioid Use Disorder Prevention and Treatment Fund awarded \$1,920,000 for two years to support SSPs through 2025. This award is combined with LD 1707's allocations of \$75,000 total annually for existing exchanges.

In addition to the aforementioned State of Maine general fund, (LD 1707 and Opioid Use Disorder Prevention and Treatment Funds), Maine CDC braided funding from federal grants to establish 2-year contracts with SSPs from July 1, 2023, to June 30, 2025. The ban on using federal funds to support SSP activities was lifted on January 6, 2016. SSPs are supported through these contracts at varying funding levels based on high acute hepatitis C disease burden and existing provision of services.

⁵ Centers for Disease Control and Prevention. Program Guidance for Implementing Certain Components of Syringe Service Programs, 2016 https://www.cdc.gov/syringe-services-programs/media/pdfs/2024/04/cdc-hiv-syringe-exchange-services.pdf

In late 2024, the Maine Recovery Council (the body established to direct the disbursement of Maine's opioid settlement funds) awarded each of Maine's certified SSPs \$75,000 a year per site for two years.

Stable and reliable funding for Maine's SSPs is critical to ensure financial sustainability and growth of organizations that serve many marginalized individuals in our communities. SSPs provide critically needed services throughout Maine, and while a modest increase in SSP sites is reported, the availability of SSP services does not appear to match the community need or are underutilized based on outbreak surveillance and reports of distance traveled for services.

Ten State-certified SSPs operated 21 sites in Maine during this reporting period:

- The City of Portland operates a site and provides outreach (as needed) in Portland.
- Commonspace operates one site in Portland.
- Down East AIDS Network/Health Equity Alliance operated sites in Bangor, Ellsworth, Deer Isle, and Rockland.
- MaineGeneral Medical Center Next Step Needle Exchange operates sites in Augusta and Waterville.
- Maine Access Points operates sites in Sanford, Rumford, Machias, and Calais.
- Spurwink operates a site in Lewiston.
- Wabanaki Public Health and Wellness operates a site in Bangor.
- Church of Safe Injection operates sites in Lewiston and Westbrook.
- Needlepoint Sanctuary operates primarily in Bangor and Milo.
- Franklin County Syringe Exchange operates sites in Farmington and Strong.

For agency-specific information and data, please see Appendices C through T.

Impact of Syringe Service Programs in Maine

Syringe Service Programs offer sterile syringes, which is crucial to reducing the risk of bloodborne infection, such as hepatitis B, hepatitis C and HIV, and prevent outbreaks. SSPs also offer a variety of harm reduction services that strengthen communities and support people who use drugs to promote their health and well-being. SSPs offer services such as: bloodborne pathogen testing, medication-assisted treatment (MAT) for opioid use disorder, linkage to care, case management, naloxone distribution, drug testing, peer support, social services, overdose prevention education, and treatment for hepatitis B, hepatitis C, and HIV.

Due to the wide range of services provided, SSPs have been shown to reduce new hepatitis C and HIV cases by an estimated 50%.⁷ New enrollees in SSPs are five times more likely to participate in a substance use recovery program and three times more likely to stop injecting drugs than

⁶ *Centers for Disease Control and Prevention*. Syringe Service Programs Fact Sheet, https://www.cdc.gov/ssp/syringe-services-programs-factsheet.html

⁷ Platt L, Minozzi S, Reed J, et al. Needle syringe programmes and opioid substitution therapy for preventing hepatitis C transmission in people who inject drugs. Cochrane Database Syst Rev. 2017;9:CD012021. doi:10.1002/14651858.CD012021.pub2.

people who use drugs who are not enrolled in an SSP.⁸ SSPs help to prevent overdose deaths by providing naloxone to community members and program enrollees, and teaching enrollees how to recognize an overdose and administer that naloxone.⁹,¹⁰,¹¹,¹²,¹³,¹⁴ Evidence shows that SSPs reduce the number of discarded used syringes in communities.¹⁵

Viral hepatitis is a leading cause of liver cancer and the most common reason for liver transplantation among adults in the United States. ¹⁶ According to the US Centers for Disease Control and Prevention's 2022 Viral Hepatitis Surveillance Report, Maine had the highest rate of acute hepatitis A and hepatitis C in the country and third-highest rate for acute hepatitis B. ¹⁷ At the same time, Maine reported the seventh highest rate of opioid overdose deaths in the United States. ¹⁸ Public health officials identified a link between the opioid epidemic and the spread of bloodborne infections such as HIV, hepatitis B, and hepatitis C. ¹⁹ In Maine, as is nationwide ²⁰, the highest risk factor for acquiring hepatitis B and hepatitis C is injection drug use. Viral hepatitis can be spread by sharing syringes, needles, and injection equipment, such as water, tourniquets, cotton, drug cookers, contaminated surfaces, or the drugs themselves. In 2023, 78 percent of drug death cases were attributed to nonpharmaceutical fentanyl. ²¹ The number of drug

⁸ Des Jarlais DC, Nugent A, Solberg A, Feelemyer J, Mermin J, Holtzman D. Syringe service programs for persons who inject drugs in urban, suburban, and rural areas — United States, 2013. MMWR Morb Mortal Wkly Rep. 2015;64(48):1337-1341. doi:10.15585/mmwr.mm6448a3.

⁹ Seal KH, Thawley R, Gee L. Naloxone distribution and cardiopulmonary resuscitation training for injection drug users to prevent heroin overdose death: A pilot intervention study. J Urban Health. 2005;82(2):303–311. doi:10.1093/jurban/jti053. ¹⁰ Galea S, Worthington N, Piper TM, Nandi VV, Curtis M, Rosenthal DM. Provision of naloxone to injection drug users as an overdose prevention strategy: Early evidence from a pilot study in New York City. Addict Behav.2006;31(5):907-912. doi:10.1016/j. addbeh.2005.07.020.

¹¹ Tobin KE, Sherman SG, Beilenson P, Welsh C, Latkin CA. Evaluation of the Staying Alive programme: Training injection drug users to properly administer naloxone and save lives. Int J Drug Policy. 2009;20(2):131-136. doi:10.1016/j.drugpo.2008.03.002.

¹² Doe-Simkins M, Walley AY, Epstein A, Moyer P. Saved by the nose: Bystander-administered intranasal naloxone hydrochloride for opioid overdose. Am J Public Health. 2009;99(5):788-791. doi:10.2105/ajph.2008.146647.

¹³ Bennett AS, Bell A, Tomedi L, Hulsey EG, Kral AH. Characteristics of an overdose prevention, response, and naloxone distribution program in Pittsburgh and Allegheny County, Pennsylvania. J Urban Health. 2011;88(6):1020-1030. doi:10.1007/s11524-011-9600-7.

¹⁴ Leece PN, Hopkins S, Marshall C, Orkin A, Gassanov MA, Shahin RM. Development and implementation of an opioid overdose prevention and response program in Toronto, Ontario. Can J Public Health. 2013;104(3):e200-204.

¹⁵ Tookes HE, Kral AH, Wenger LD, et al. A comparison of syringe disposal practices among injection drug users in a city with versus a city without needle and syringe programs. Drug Alcohol Depend. 2012;123(1-3):255-259. doi:10.1016/j.drugalcdep.2011.12.001.

¹⁶ American Cancer Society. Liver Cancer Risk Factors. https://www.cancer.org/cancer/types/liver-cancer/causes-risks-prevention/risk-factors.html

¹⁷ Centers for Disease Control and Prevention. Viral Hepatitis Surveillance Report – United States, 2022. https://www.cdc.gov/hepatitis-surveillance-2022/about/index.html.

¹⁸ Centers for Disease Control and Prevention. 2020 Viral Hepatitis Surveillance Report. https://www.cdc.gov/hepatitis/statistics/SurveillanceRpts.htm. Published July 2021.

¹⁹ Schwetz TA, Calder T, Rosenthal E, Kattakuzhy S, Fauci AS. Opioids and Infectious Diseases: A Converging Public Health Crisis. J Infect Dis. 2019 Jul 2;220(3):346-349. doi: 10.1093/infdis/jiz133. PMID: 30941402; PMCID: PMC6941614.

²⁰Centers for Disease Control and Prevention. Syringe Services Programs Fact Sheet, https://www.cdc.gov/ssp/syringe-services-programs-factsheet.html

²¹ Maine Drug Data Hub, https://mainedrugdata.org/

deaths continues to remain high in 2023; however, Maine experienced a slight decrease in fatal overdose deaths from 2022 (total of 723 fatal overdoses) to 2023 (total of 607 fatal overdoses).²²

In Maine in 2023, 58 percent of acute hepatitis A cases indicated injection drug use, 33 percent of acute hepatitis B cases were people who injected drugs and 28 percent were people who used non-injection drugs.²³,²⁴ For acute hepatitis C, 60 percent were people who used injection drugs and 48 percent were people who used non-injection drugs.²⁵

The COVID-19 pandemic greatly impacted disease burden among certain groups at increased risk of acquiring hepatitis A, such as people who use both injection and non-injection drugs, people who are unhoused or experiencing unstable housing, and people who are currently or recently incarcerated. Accessing hygienic supplies, housing, and vaccines was difficult for these groups during the pandemic and continues to be difficult. During 2023, Maine had multiple encampments of people experiencing homelessness and a total of 4,258 Maine people reported experiencing homelessness in 2023 according to the Maine Point in Time Count. 26 As of January 23, 2024, the total count of people experiencing homelessness in Maine was 2,695, showing an apparent decrease from 2023 numbers. While Maine's population is about 92 percent white, individuals from racial minorities comprised 51 percent of the 2024 Point in Time Count. Additionally, 377 of the adults experiencing homelessness reported having a substance use disorder.²⁷ SSPs worked to provide essential services, such as basic needs items, health care resources, linkage to care, and more. Delivering services to this population became difficult as encampments were frequently closed, and people living in these encampments were forced to seek alternative housing options. Many people living in encampments do not have a cellphone, reliable internet access, nor an address, making it difficult to deliver services where SSP staff can outreach and follow up on previous services.

²² Maine Drug Data Hub, https://mainedrugdata.org/

²³ Maine Center for Disease Control and Prevention. Maine Surveillance Report – Acute Hepatitis A. 2023 https://www.maine.gov/dhhs/mecdc/infectious-disease/epi/documents/2023-HAV-Acute-SR.pdf

²⁴ Maine Center for Disease Control and Prevention. Maine Surveillance Report – Acute Hepatitis B. 2023 https://www.maine.gov/dhhs/mecdc/infectious-disease/epi/documents/2023-HBV-SR.pdf

²⁵ Maine Center for Disease Control and Prevention. Maine Surveillance Report – Hepatitis C. 2023 https://www.maine.gov/dhhs/mecdc/infectious-disease/epi/documents/2023-HCV-SR.pdf

²⁶ Maine State Housing Authority. 2023 Point in Time Count.

https://www.mainehousing.org/docs/default-source/housing-reports/2023-point-in-time.pdf?sfvrsn=e1c28015 5

²⁷ Maine State Housing Authority. 2023 Point in Time Count.

https://www.mainehousing.org/docs/default-source/housing-reports/2023-point-in-time.pdf?sfvrsn=e1c28015 5

2024 Syringe Service Program Data

In reviewing data provided in this report, to note, to ensure a level of confidentiality, protect the privacy of individuals represented in this dataset, and to reduce a potential barrier to accessing services, SSPs assign a unique identifier to a participant enrolling in services, also, there is no proof of identity required. Individuals may enroll in one or more SSP and be assigned a different ID. Each SSP collects and reports data which is then compiled at the program level. Data analyses includes unique records of service and exchange information reported by SSPs; statewide demographics may include duplicate participants.

Services

In 2024, SSPs reported, collectively, a total of 15,949 individuals enrolled in syringe service programming (Graph 5.1); SSPs reported 1,999 new participant enrollments in 2024 (Graph 6.1). (See Limitations further in this section of the report.) A total of 2,487,888 used syringes were collected and disposed of during 31,697 exchange events, defined as when an individual visits an SSP to exchange one or more used syringes and/or to receive support services (Graph 8.1 and Graph 7.1). In 2024, there were an average of 78 syringes exchanged per exchange event. Many SSPs serve as either Tier 1 or Tier 2 naloxone distribution sites through Maine Naloxone Distribution Initiative, serving as the driving forces of naloxone distribution in Maine. Tier One Distributors distribute naloxone to Tier Two distributors, who then distribute to other organizations, institutions, and the community. There were 13,688 encounters where SSPs distributed naloxone directly. SSPs also distributed 16,439 xylazine test kits and 21,244 fentanyl test kits.

Despite operational challenges, many agencies in Portland, Lewiston, Westbrook, and Bangor were able to work collaboratively with their local jurisdictions to provide biohazard sharps disposal boxes in key hotspots in their respective service areas. SSPs provided educational brochures and communication from Maine's Department of Environmental Protection on safe disposal of household medical sharps. This expanded access points for safe disposal of syringes. SSPs also distribute sharps containers on site for participants that may not live near an accessible SSP so that these participants may safely dispose of their syringes at home. In 2024, they distributed 6,710 sharps containers of various sizes. Due to these other avenues for syringe disposal, not all syringes may be returned to an SSP for disposal as there are other more accessible routes for disposal.

SSPs frequently coordinate to host community outreach and syringe waste pickup events. SSPs are an essential resource for many clients, particularly those who are unstably housed, by providing hygiene kits, food, masks, hand sanitizer, and warm clothing to clients directly.

²⁸ Maine Drug Data Hub. Distribute Naloxone. https://mainedrugdata.org/maine-drug-data-hub/distribute-naloxone/

Referrals

SSPs provided 92,983 referrals to clients during exchange events during 2024, an increase from 2023 and the largest amount of referrals by SSPs ever recorded in Maine (refer to graph 2.1). SSPs refer clients to other organizations and providers, as well as to programs within the same SSP organization, as certified SSPs are often part of a larger organization or institution that offer a variety of services.

SSP clients received 4,498 referrals for testing and linkage to care for viral hepatitis, STD/STI, and HIV, and 2,377 referrals for health care providers, including dental care, and health insurance, and 3,030 referrals for substance use treatment, recovery services, and behavioral and mental health in 2024. The largest number of referrals in 2024 were 25,891 to basic needs, general assistance, and food, which also includes housing and rental assistance.

The top 10 most referred services for 2024, as demonstrated in Graph 2.2 were (in order from most referrals to least): basic needs and General Assistance, peer support, naloxone distribution and education, wound care, drug checking supplies and education, infectious disease (such as testing and linkage to care for HIV, STD, and viral hepatitis), overdose aftercare, substance use treatment and recovery (including behavioral and mental health), education support, and health care (medical care, dental care, and health insurance).

Demographics

Demographic data may be collected at SSPs; however, enrollees can decline to provide demographic information. Of the total 33,852 encounters where participants were served, only at 28,727 encounters (or 85% of total encounters) did participants consent to provide demographic information for ethnicity. The majority of program enrollees identified as Non-Hispanic/Latino, and only 3 percent of program enrollees identified as Hispanic/Latino (Graph 3.1). The majority of program enrollees identified as White (87%). 356 individuals (1%) as Black/African American, 250 (1%) as American Indian/Alaska Native, 503 (2%) as multi-race, 130 (1%) as other (Graph 3.2). Sixty percent of Syringe Service Program enrollees identified as male, 31 percent of enrollees identified as female, and 9 percent are unknown or other (Graph 4.1). Syringe Service Program enrollees also identified primarily as 26-49 years of age (80%), and only 11 percent as 50 years or older, and 9 percent as 18-25 years of age (Graph 5.1).

Limitations

There are two limitations noted with this report. First, individuals seeking SSP services can enroll at one or more SSP, resulting in the total number of enrollees likely including individual participants counted more than once if they seek services across the State. Exchanges/visits are counted separately and may include multiple exchanges/visits for one individual. (See Provider-Specific Data further in this report.) Second, in late 2023, Maine CDC implemented a new data collection process utilizing REDCap, an electronic reporting system, as the primary SSP reporting tool. For the 2023-2024 reporting period, SSPs were required to submit service data via REDCap. The transition to REDCap revealed inconsistencies in data reported between the last

reporting period (November 2022 – October 2023) and the current period (November 2023 – October 2024). In particular, the total enrollees from November 2023 – October 2024 does not equal the total enrollees from November 2022 – October 2023 plus new enrollees from November 2023 – October 2024. This is recognized as a data quality issue that could not be reconciled in discussion with SSPs and during data cleaning and analysis. Ongoing quality improvement technical assistance and data monitoring are a priority for 2025. Despite these limitations, this report accurately represents data reported by SSPs on syringe services delivered in Maine during 2023-2024.

Conclusion

Syringe Service Programs provided a wide variety of vital services to their communities from sterile syringes and disposal to testing for infectious disease. In 2024, Syringe Service Programs were able to dramatically increase referral services, demonstrating the continued need in the community, as well as the ability of SSPs to create trust and connections to services. In 2025, Maine CDC will continue to work with SSPs to build capacity and strengthen data collection systems and data quality.

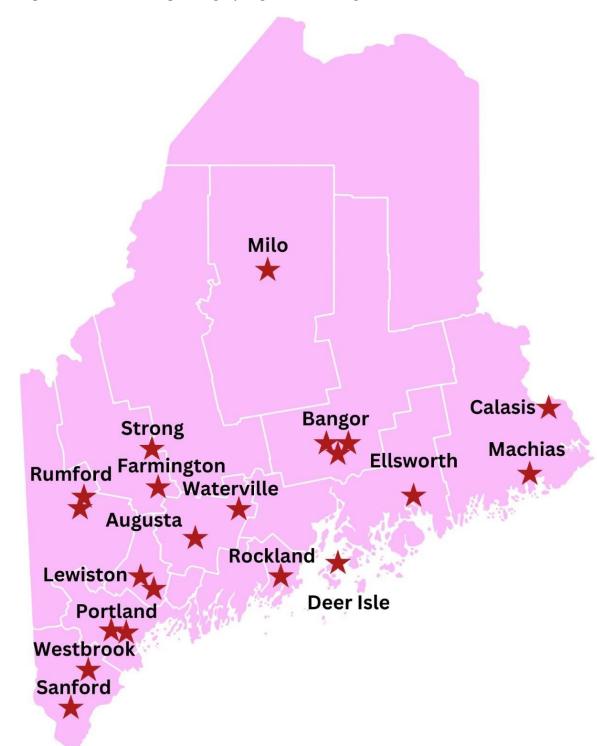
Appendix A: SSP Organizations Details

Table 1.1 -List of SSPs

Agency	Type of Site	Site Location	Certification Date	
Commonspace (formerly Amistad)	Fixed	Portland	November 2020	
Church of Safe Injection	Fixed	Lewiston	September 2021	
Church of Saje Injection	Outreach	Rumford	September 2021	
Church of Safe Injection	Outreach	Westbrook	October 2023	
City of Portland	Fixed & Outreach	Portland	September 1998	
MaineHealth Franklin County Syringe Exchange	Fixed	Farmington	November 2023	
MaineHealth Franklin County Syringe Exchange	Outreach	Strong	November 2023	
Health Equity Alliance	Fixed	Ellsworth	July 2014	
Health Equity Alliance	Fixed	Deer Isle	February 2021	
Health Equity Alliance	Fixed	Rockland	February 2021	
Health Equity Alliance	Fixed	Bangor	July 2014	
Needlepoint Sanctuary	Outreach	Bangor	January 2024	
Needlepoint Sanctuary	Outreach	Milo	January 2024	
MaineGeneral Medical Center	Fixed	Augusta	December 2004	
MaineGeneral Medical Center	Fixed	Waterville	February 2018	
Maine Access Points	Fixed	Sanford	February 2020	
Maine Access Points	Outreach	Calais	February 2020	
Maine Access Points	Points Fixed Rum		June 2022	
Maine Access Points	Fixed	Machias	March 2021	
Spurwink (formerly TriCounty Mental Health Services)	Fixed	Lewiston	March 2020	
Wabanaki Public Health and Wellness	Fixed	Bangor	February 2021	

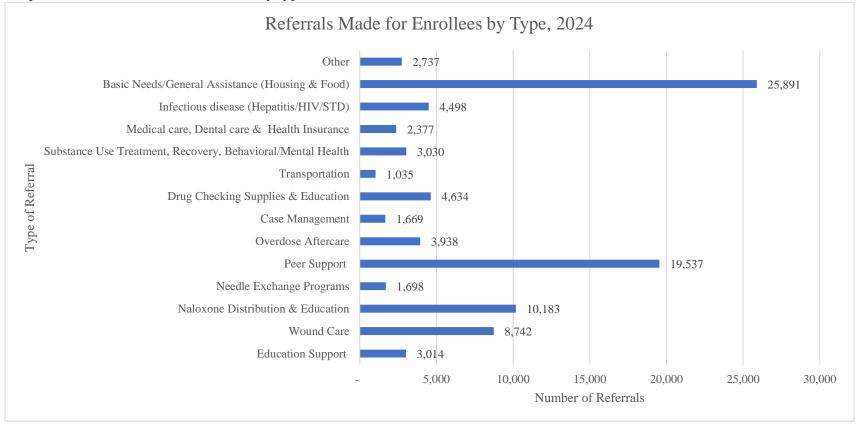
Note: "Fixed" refers to a brick and mortar site, and "outreach" refers to mobile, non-brick and mortar sites.

Map 1.1 - Location of Operating Syringe Service Program sites in Maine



Appendix B: SSP Data for 2024

Graph 1.1 Referrals made for enrollees by type, 2024



Graph 2.1 Referrals made for services at syringe service programs, 2014-2024 Number of Referrals at Syringe Service Programs, 2014-2024 Number of Referrals ■ Primary/Medical Care ■ Infectious Disease (testing, linkage to care, treatment) ■ Substance Use Treatment, Recovery, Behavioral/Mental Health ■ Housing/Basic Needs ■ Peer Support ■ Naloxone Distribution & Overdose Prevention Education ■ Drug Testing Kits & Education ■ Wound Care & Safer Injection ■ Overdose Aftercare Other

Graph 2.2 Top 10 Referrals Made for Enrollees by Type, 2024 Top 10 Referrals made for Enrollees by Type, 2024 **Education Support** Substance Use Treatment, Medical care, Dental care & 3% Recovery, and Behavioral/Mental Health Insurance Health 3% Overdose Aftercare Basic Needs/General Infectious Disease Assistance (Housing & Food) (HIV/HCV/STD/STI) 30% Drug Checking Supplies & Education 5% Wound care 10%

Peer Support

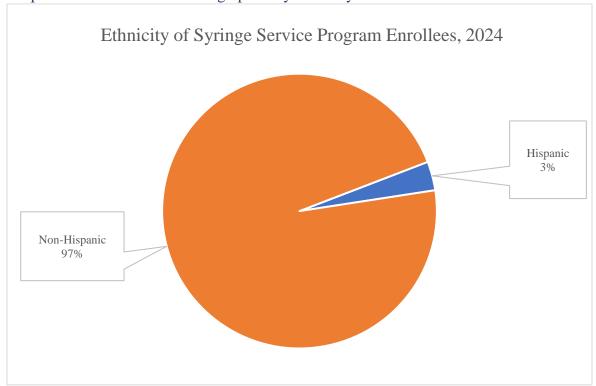
23%

Naloxone Distribution &

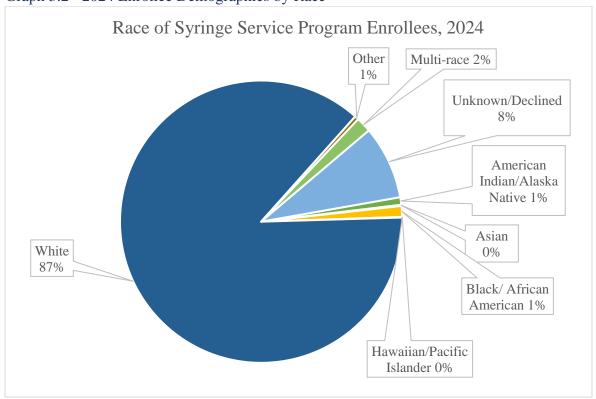
Education

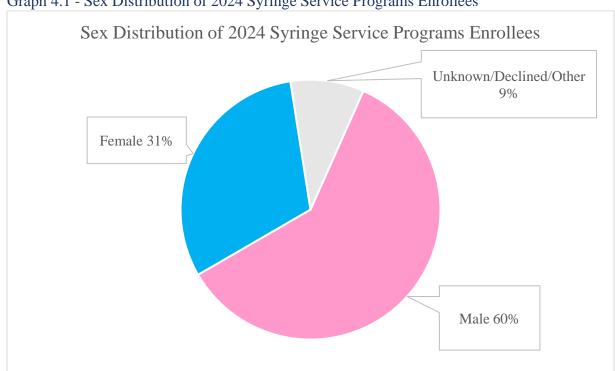
12%

Graph 3.1 - 2024 Enrollee Demographics by Ethnicity



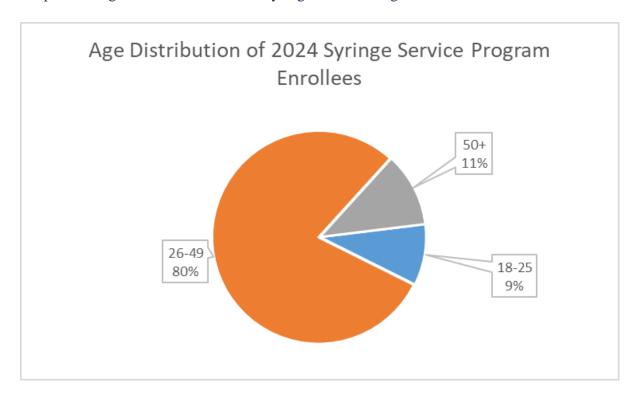
Graph 3.2 - 2024 Enrollee Demographics by Race



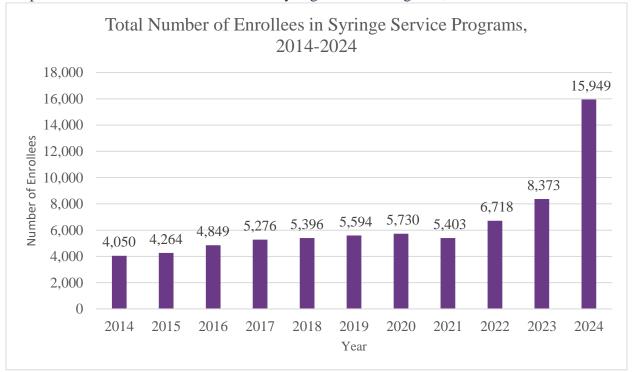


Graph 4.1 - Sex Distribution of 2024 Syringe Service Programs Enrollees

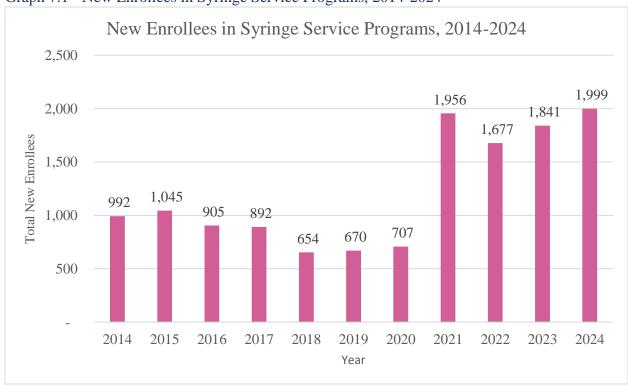
Graph 5.1 - Age Distribution of 2024 Syringe Service Programs Enrollees

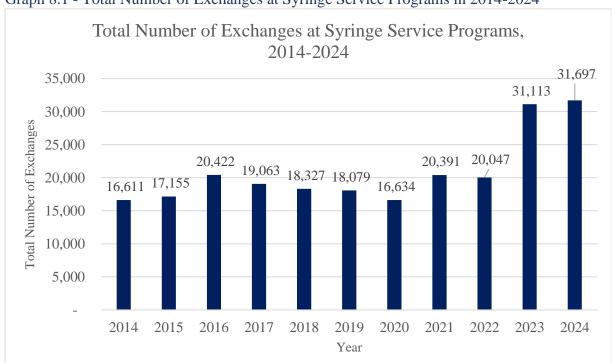


Graph 6.1 - Total Number of Enrollees in Syringe Service Programs, 2014-2024



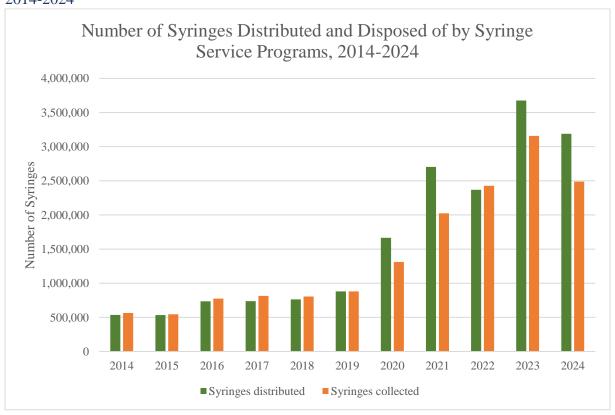
Graph 7.1 - New Enrollees in Syringe Service Programs, 2014-2024





Graph 8.1 - Total Number of Exchanges at Syringe Service Programs in 2014-2024

Graph 9.1 - Total Number of Syringes Distributed and Disposed of by Syringe Service Programs, 2014-2024



Provider-Specific Data

Appendix C: Church of Safe Injection – Lewiston 11/1/2023-10/31-2024

Operator: Church of Safe Injection

Location of Site: Lewiston, established February 2021

Established Date: 2018, Certified in 2021

Indicator	Quantity
Total enrolled	1,523
New enrollees, total	590
Number of HIV Tests conducted	1
Number of rapid antibody HCV tests conducted	0
Number of syringes disposed, total	136,692
Syringes distributed, total	257,394
Total exchanges	3,387
Total referrals made	8,534
Number of encounters of naloxone distribution	1,099

Number of Referrals Made	Quantity
Education Support	0
Legal Assistance	0
Wound Care	721
Naloxone Distribution & Education	1,231
Syringe Exchange Programs	1
Peer Support	3,219
Overdose Aftercare	974
Case Management	12
Drug Checking Supplies & Education	354
Transportation	9
Financial Education	0
Intimate Partner Violence	0
Substance Use Treatment, Recovery, Behavioral/Mental Health	121
Medical Care/Dental Care/Health Insurance	13
Infectious Disease (Viral Hepatitis/HIV/STD) Testing & Linkage to	52
Care	
Basic Needs/General Assistance (Housing and Rental)/Food	1,396
Other	431
Total Referrals Made	8,534

Clients Served	Male 18-25	Male 26-49	Male 50+	Female 18-25	Female 26-49	Female 50+	Unknown/Other 18-25	Unknown/Other 26-49	Unknown/Other 50+
Hispanic/Latino	0	31	<6	<6	16	<6	0	0	0
Non-Hispanic/ Latino	73	962	142	53	771	80	0	27	<6
TOTAL	73	993	*	*	787	*	0	27	<6

Clients Served	Male	Male	Male	Female	Female	Female	Unknown/Other	Unknown/Other	Unknown/Other
0.000.000	18-25	26-49	50+	18-25	26-49	50+	18-25	26-49	50+
American Indian/ Alaska Native	0	<6	0	0	<6	0	0	0	0
Asian	0	<6	0	0	0	0	0	0	0
Black/African American	9	32	8	6	15	<6	0	0	0
Hawaiian/ Pacific Islander	0	9	0	0	9	0	0	0	0
White	58	875	123	41	690	71	0	10	0
Other	0	0	0	0	0	0	0	0	0
Multi-race	6	49	7	<6	26	0	0	0	0
Unknown	0	18	<6	<6	42	8	0	17	<6
TOTAL	73	993	*	*	787	*	0	27	<6

^{*} Due to sensitivity of data, fewer than six encounters are suppressed to avoid identification

Appendix D: Commonspace-Portland 11/02/23-10/31/24

Operator: Commonspace

Location of Site: 103 India Street, Portland, ME 04101

Established Date: March 16, 2021

Indicator	Quantity
Total enrolled	1,289
New enrollees, total	61
Number of HIV Tests conducted	53
Number of rapid antibody HCV tests conducted	15
Number of syringes disposed, total	202,287
Syringes distributed, total	232,898
Total exchanges	8,309
Total referrals made	56,179
Number of encounters of naloxone distribution	4,248

Number of Referrals Made	Quantity
Education Support	2,803
Legal Assistance	19
Wound Care	5,906
Naloxone Distribution & Education	3,666
Syringe Exchange Programs	1,101
Peer Support	13,484
Overdose Aftercare	2,297
Case Management	470
Drug Checking Supplies & Education	963
Transportation	733
Financial Education	5
Intimate Partner Violence	705
Substance Use Treatment, Recovery, Behavioral/Mental Health	2,087
Medical Care/Dental Care/Health Insurance	1,896
Infectious Disease (Viral Hepatitis/HIV/STD) Testing & Linkage to	2,282
Care	
Basic Needs/General Assistance (Housing and Rental)/Food	17,063
Other	699
Total Referrals Made	56,179

Clients Served	Male	Male	Male	Female	Female	Female	Unknown/Other	Unknown/Other	Unknown/Other
	18-25	26-49	50+	18-25	26-49	50+	18-25	26-49	50+
Hispanic/Latino	27	126	40	9	67	36	10	<6	14
Non-Hispanic/ Latino	462	6,349	1,136	354	2,951	332	17	95	33
TOTAL	489	6,475	1,176	363	3,018	368	27	*	47
Clients Served	Male 18-25	Male 26-49	Male 50+	Female 18-25	Female 26-49	Female 50+	Unknown/Other 18-25	Unknown/Other 26-49	Unknown/Other 50+
American Indian/ Alaska Native	0	0	<6	0	6	0	0	0	0
Asian	0	0	0	0	0	0	0	<6	0
Black/African American	0	0	0	0	0	0	0	0	0
Hawaiian/ Pacific Islander	0	0	0	0	0	0	0	0	0
White	435	6,327	1,134	339	2,951	332	15	130	37
Other	0	0	0	0	0	0	0	0	0
Multi-race	27	126	45	9	70	36	14	0	7
Unknown	0	0	0	0	0	0	0	0	0
TOTAL	480	6,453	*	348	3,027	368	29	*	44

^{*} Due to sensitivity of data, fewer than six encounters are suppressed to avoid identification

Appendix E: Health Equity Alliance – Bangor 11/1/2023-10/31/2024

Operator: Down East AIDS Network/Health Equity Alliance

Location of Site: 304 Hancock Street Suite 3B, Bangor, ME 04401

Established Date: 2002

Indicator	Quantity
Total enrolled	4,920
New enrollees, total	347
Number of HIV Tests conducted	0
Number of rapid antibody HCV tests conducted	0
Number of syringes disposed, total	550,808
Syringes distributed, total	588,863
Total exchanges	6,013
Total referrals made	9,358
Number of encounters of naloxone distribution	2,744

Number of Referrals Made	Quantity
Education Support	2
Legal Assistance	0
Wound Care	427
Naloxone Distribution & Education	2,717
Syringe Exchange Programs	4
Peer Support	1,110
Overdose Aftercare	492
Case Management	6
Drug Checking Supplies & Education	994
Transportation	162
Financial Education	0
Intimate Partner Violence	2
Substance Use Treatment, Recovery, Behavioral/Mental Health	46
Medical Care/Dental Care/Health Insurance	1
Infectious Disease (Viral Hepatitis/HIV/STD) Testing & Linkage to	55
Care	
Basic Needs/General Assistance (Housing and Rental)/Food	3,230
Other	110
Total Referrals Made	9,358

Clients Served	Male 18-25	Male 26-49	Male 50+	Female 18-25	Female 26-49	Female 50+	Unknown/Other 18-25	Unknown/Other 26-49	Unknown/Other 50+
Hispanic/Latino	25	8	0	<6	15	0	<6	0	0
Non-Hispanic/ Latino	493	1,147	29	316	790	11	8	51	12
TOTAL	518	1,155	29	*	*	11	*	51	12

~ ~ ~				_					
Clients Served	Male	Male		Female	Female	Female	Unknown/Other	Unknown/Other	Unknown/Other
	18-25	26-49	50+	18-25	26-49	50+	18-25	26-49	50+
American Indian/ Alaska Native	13	33	<6	12	68	0	0	0	0
Asian	0	<6	0	0	<6	<6	0	0	0
Black/African American	6	6	<6	0	9	<6	0	0	0
Hawaiian/ Pacific Islander	0	0	0	0	0	0	0	0	0
White	452	1,026	24	291	665	9	6	11	<6
Other	24	<6	0	<6	13	0	0	0	0
Multi-race	9	11	0	<6	7	0	0	0	0
Unknown	14	70	<6	8	41	0	<6	40	11
TOTAL	518	1,155	29	*	*	11	*	51	*

^{*} Due to sensitivity of data, fewer than six encounters are suppressed to avoid identification

Appendix F: Health Equity Alliance – Deer Isle 11/1/2023 – 10/31/2024

Operator: Downeast AIDS Network/Health Equity Alliance Location of Site: 627 N. Deer Isle Road, Deer Isle, ME 04627

Established Date: 2021

Indicator	Quantity
Total enrolled	4
New enrollees, total	0
Number of HIV Tests conducted	0
Number of rapid antibody HCV tests conducted	0
Number of syringes disposed, total	320
Syringes distributed, total	120
Total exchanges	3
Total referrals made	0
Number of encounters of naloxone distribution	3

Number of Referrals Made	Quantity
Education Support	0
Legal Assistance	0
Wound Care	0
Naloxone Distribution & Education	0
Syringe Exchange Programs	0
Peer Support	0
Overdose Aftercare	0
Case Management	0
Drug Checking Supplies & Education	0
Transportation	0
Financial Education	0
Intimate Partner Violence	0
Substance Use Treatment, Recovery, Behavioral/Mental Health	0
Medical Care/Dental Care/Health Insurance	0
Infectious Disease (Viral Hepatitis/HIV/STD) Testing & Linkage to	0
Care	
Basic Needs/General Assistance (Housing and Rental)/Food	0
Other	0
Total Referrals Made	0

^{*}Demographics not reported due to low volume data (<10 enrollee encounters) collected

Appendix G: Health Equity Alliance – Ellsworth 11/1/2023 – 10/31/2024

Operator: Down East AIDS Network/Health Equity Alliance Location of Site: 5 Long Lane Suite 1, Ellsworth, ME 04605

Established Date: 2000

Indicator	Quantity
Total enrolled	1,255
New enrollees, total	15
Number of HIV Tests conducted	0
Number of rapid antibody HCV tests conducted	0
Number of syringes disposed, total	14,932
Syringes distributed, total	22,530
Total exchanges	210
Total referrals made	130
Number of encounters of naloxone distribution	42

Number of Referrals Made	Quantity
Education Support	0
Legal Assistance	0
Wound Care	8
Naloxone Distribution & Education	31
Syringe Exchange Programs	0
Peer Support	2
Overdose Aftercare	20
Case Management	0
Drug Checking Supplies & Education	2
Transportation	0
Financial Education	0
Intimate Partner Violence	0
Substance Use Treatment, Recovery, Behavioral/Mental Health	0
Medical Care/Dental Care/Health Insurance	0
Infectious Disease (Viral Hepatitis/HIV/STD) Testing & Linkage to	1
Care	
Basic Needs/General Assistance (Housing and Rental)/Food	4
Other	62
Total Referrals Made	130

Clients Served	Male 18-25	Male 26-49	Male 50+	Female 18-25	Female	Female	Unknown/Other	Unknown/Other	Unknown/Other
	10-23	20-49	30+	10-23	26-49	50+	18-25	26-49	50+
Hispanic/Latino	0	0	0	0	0	0	0	0	0
Non-Hispanic/ Latino	22	61	<6	15	32	<6	<6	<6	<6
TOTAL	22	61	<6	15	32	<6	<6	<6	<6

Clients Served	Male	Male	Male	Female	Female	Female	Unknown/Other	Unknown/Other	Unknown/Other
Oneng berveu	18-25	26-49	50+	18-25	26-49	50+	18-25	26-49	50+
American Indian/ Alaska Native	0	<6	<6	<6	6	0	0	0	0
Asian	0	0	0	0	0	0	0	0	0
Black/African American	0	0	0	0	0	0	0	0	0
Hawaiian/ Pacific Islander	0	0	0	0	0	0	0	0	0
White	22	54	<6	12	26	<6	<6	<6	<6
Other	0	0	0	0	0	0	0	0	0
Multi-race	0	<6	0	0	0	0	0	0	0
Unknown	0	<6	0	<6	0	0	0	<6	0
TOTAL	22	61	<6	15	32	<6	<6	<6	<6

Appendix H: Health Equity Alliance – Rockland 11/1/2023-10/31/2024

Operator: Down East AIDS Network/Health Equity Alliance Location of Site: 11 White Street, Rockland, ME 04841

Established Date: 2020

Indicator	Quantity
Total enrolled	38
New enrollees, total	36
Number of HIV Tests conducted	0
Number of rapid antibody HCV tests conducted	0
Number of syringes disposed, total	6,740
Syringes distributed, total	16,640
Total exchanges	123
Total referrals made	329
Number of encounters of naloxone distribution	0

Number of Referrals Made	Quantity
Education Support	0
Legal Assistance	0
Wound Care	0
Naloxone Distribution & Education	0
Syringe Exchange Programs	0
Peer Support	0
Overdose Aftercare	0
Case Management	1
Drug Checking Supplies & Education	0
Transportation	35
Financial Education	0
Intimate Partner Violence	0
Substance Use Treatment, Recovery, Behavioral/Mental Health	87
Medical Care/Dental Care/Health Insurance	5
Infectious Disease (Viral Hepatitis/HIV/STD) Testing & Linkage to	44
Care	
Basic Needs/General Assistance (Housing and Rental)/Food	67
Other	90
Total Referrals Made	329

Clients Served	Male 18-25	Male 26-49	Male 50+	Female 18-25	Female 26-49	Female 50+	Unknown/Other 18-25	Unknown/Other 26-49	Unknown/Other 50+
Hispanic/Latino	0	<6	0	0	0	0	0	0	0
Non-Hispanic/ Latino	<6	37	0	11	17	0	8	17	0
TOTAL	<6	*	0	11	17	0	8	17	0

Clients Served	Male	Male	Male	Female	Female	Female	Unknown/Other	Unknown/Other	Unknown/Other
	18-25	26-49	50+	18-25	26-49	50+	18-25	26-49	50+
American Indian/ Alaska Native	0	0	0	0	0	0	0	0	0
Asian	0	0	0	0	0	0	0	0	0
Black/African American	0	0	0	0	0	0	0	0	0
Hawaiian/ Pacific Islander	0	0	0	0	0	0	0	0	0
White	<6	37	0	11	17	0	0	17	0
Other	0	<6	0	0	0	0	0	0	0
Multi-race	0	0	0	0	0	0	0	0	0
Unknown	0	0	0	0	0	0	0	0	0
TOTAL	<6	*	0	11	17	0	8	17	0

^{*} Due to sensitivity of data, fewer than six encounters are suppressed to avoid identification

Appendix I: Maine Access Points – Calais 11/1/2023-10/31-2024

Operator: Maine Access Points

Location of Site: Calais Established Date: 2020

Indicator	Quantity
Total enrolled	117
New enrollees, total	9
Number of HIV Tests conducted	1
Number of rapid antibody HCV tests conducted	0
Number of syringes disposed, total	36,400
Syringes distributed, total	37,360
Total exchanges	187
Total referrals made	245
Number of encounters of naloxone distribution	31

Number of Referrals Made	Quantity
Education Support	10
Legal Assistance	2
Wound Care	16
Naloxone Distribution & Education	14
Syringe Exchange Programs	0
Peer Support	63
Overdose Aftercare	9
Case Management	0
Drug Checking Supplies & Education	31
Transportation	8
Financial Education	1
Intimate Partner Violence	3
Substance Use Treatment, Recovery, Behavioral/Mental Health	23
Medical Care/Dental Care/Health Insurance	5
Infectious Disease (Viral Hepatitis/HIV/STD) Testing & Linkage to	5
Care	
Basic Needs/General Assistance (Housing and Rental)/Food	32
Other	23
Total Referrals Made	245

Clients Served	Male 18-25	Male 26-49	Male 50+	Female 18-25	Female 26-49	Female 50+	Unknown/Other 18-25	Unknown/Other 26-49	Unknown/Other 50+
Hispanic/Latino	0	0	<6	<6	0	0	0	0	0
Non-Hispanic/ Latino	<6	12	8	8	26	<6	0	0	0
TOTAL	<6	12	*	*	26	<6	0	0	0

Clients Served	Male 18-25	Male 26-49	Male 50+	Female 18-25	Female 26-49	Female 50+	Unknown/Other 18-25	Unknown/Other 26-49	Unknown/Other 50+
American Indian/ Alaska Native	0	0	<6	<6	<6	0	0	0	0
Asian	0	0	0	0	0	0	0	0	0
Black/African American	0	0	0	0	0	0	0	0	0
Hawaiian/ Pacific Islander	0	0	0	0	<6	0	0	0	0
White	<6	12	7	<6	24	<6	0	0	0
Other	0	0	0	0	0	6	0	0	0
Multi-race	0	0	0	0	0	0	0	0	0
Unknown	0	0	0	0	0	0	0	0	0
TOTAL	<6	12	*	*	27	<6	0	0	0

^{*} Due to sensitivity of data, fewer than six encounters are suppressed to avoid identification

Appendix J: Maine Access Points – Machias 11/1/2023-10/31-2024

Operator: Maine Access Points

Location: Machias Established Date: 2021

Indicator	Quantity
Total enrolled	121
New enrollees, total	23
Number of HIV Tests conducted	2
Number of rapid antibody HCV tests conducted	0
Number of syringes disposed, total	90,056
Syringes distributed, total	84,330
Total exchanges	204
Total referrals made	555
Number of encounters of naloxone distribution	71

Number of Referrals Made	Quantity
Education Support	15
Legal Assistance	4
Wound Care	57
Naloxone Distribution & Education	79
Syringe Exchange Programs	1
Peer Support	194
Overdose Aftercare	14
Case Management	2
Drug Checking Supplies & Education	50
Transportation	10
Financial Education	0
Intimate Partner Violence	2
Substance Use Treatment, Recovery, Behavioral/Mental Health	30
Medical Care/Dental Care/Health Insurance	6
Infectious Disease (Viral Hepatitis/HIV/STD) Testing & Linkage to	22
Care	
Basic Needs/General Assistance (Housing and Rental)/Food	50
Other	19
Total Referrals Made	555

Emonee Demographies (encounters)												
Clients Served	Male	Male		Female	Female	Female	Unknown/Other	Unknown/Other	Unknown/Other			
	18-25	26-49	50+	18-25	26-49	50+	18-25	26-49	50+			
Hispanic/Latino	0	0	0	0	0	0	0	0	0			
Non-Hispanic/ Latino	<6	41	<6	<6	82	8	0	0	0			
TOTAL	<6	41	<6	<6	82	8	0	0	0			
							L	L	L			
Clients Served	Male	Male	Male	Female	Female	Female	Unknown/Other	Unknown/Other	Unknown/Other			
	18-25	26-49	50+	18-25	26-49	50+	18-25	26-49	50+			
American Indian/ Alaska Native	0	0	0	0	0	0	0	0	0			
Asian	0	0	0	0	0	0	0	0	0			
Black/African American	0	0	0	0	0	0	0	0	0			
Hawaiian/ Pacific Islander	0	0	0	0	0	0	0	0	0			
White	<6	41	<6	<6	82	8	0	0	0			
Other	0	0	0	0	0	0	0	0	0			
Multi-race	0	0	0	0	0	0	0	0	0			
Unknown	0	0	0	0	0	0	0	0	0			
TOTAL	<6	41	<6	<6	82	8	0	0	0			

Appendix K: Maine Access Points – Rumford 11/1/2023-10/31/2024

Operator: Maine Access Points Location of Site: Rumford

Established Date: 2020, services began June 2022

Indicator	Quantity
Total enrolled	175
New enrollees, total	40
Number of HIV Tests conducted	42
Number of rapid antibody HCV tests conducted	0
Number of syringes disposed, total	148,670
Syringes distributed, total	172,787
Total exchanges	286
Total referrals made	1,014
Number of encounters of naloxone distribution	176

Number of Referrals Made	Quantity
Education Support	0
Legal Assistance	0
Wound Care	198
Naloxone Distribution & Education	219
Syringe Exchange Programs	0
Peer Support	296
Overdose Aftercare	58
Case Management	2
Drug Checking Supplies & Education	171
Transportation	0
Financial Education	1
Intimate Partner Violence	1
Substance Use Treatment, Recovery, Behavioral/Mental Health	1
Medical Care/Dental Care/Health Insurance	2
Infectious Disease (Viral Hepatitis/HIV/STD) Testing & Linkage to	51
Care	
Basic Needs/General Assistance (Housing and Rental)/Food	7
Other	7
Total Referrals Made	1,014

Clients Served	Male 18-25	Male 26-49	Male 50+	Female 18-25	Female 26-49	Female 50+	Unknown/Other 18-25	Unknown/Other 26-49	Unknown/Other 50+
Hispanic/Latino	0	<6	0	0	<6	0	0	<6	0
Non-Hispanic/ Latino	<6	62	<6	<6	85	14	0	11	0
TOTAL	<6	*	<6	<6	86	14	0	*	0

Clients Coursed	Mole	Male	Mola	Fomole	Б .	ъ .	T. 1 /0/2	T. 1 (0.7	T. 1 (0.7
Clients Served	Male			Female	Female	Female	Unknown/Other	Unknown/Other	Unknown/Other
	18-25	26-49	50+	18-25	26-49	50+	18-25	26-49	50+
American Indian/ Alaska Native	0	0	0	0	<6	<6	0	<6	0
Asian	0	0	0	0	0	0	0	0	0
Black/African American	0	<6	0	0	0	0	0	0	0
Hawaiian/ Pacific Islander	<6	0	0	0	0	0	0	0	0
White	0	60	<6	<6	81	13	0	10	0
Other	0	<6	0	0	0	0	0	0	0
Multi-race	0	0	0	0	0	0	0	0	0
Unknown	0	<6	0	0	<6	0	0	0	0
TOTAL	<6	64	<6	<6	*	*	0	*	0

^{*} Due to sensitivity of data, fewer than six encounters are suppressed to avoid identification

Appendix L: Maine Access Points – Sanford 11/1/2023-10/31-2024

Operator: Maine Access Points Location of Site: Sanford Established Date: 2020

Indicator	Quantity
Total enrolled	613
New enrollees, total	145
Number of HIV Tests conducted	7
Number of rapid antibody HCV tests conducted	5
Number of syringes disposed, total	258,145
Syringes distributed, total	269,245
Total exchanges	955
Total referrals made	2,507
Number of encounters of naloxone distribution	374

Number of Referrals Made	Quantity
Education Support	29
Legal Assistance	1
Wound Care	294
Naloxone Distribution & Education	493
Syringe Exchange Programs	0
Peer Support	1,013
Overdose Aftercare	72
Case Management	9
Drug Checking Supplies & Education	366
Transportation	11
Financial Education	0
Intimate Partner Violence	2
Substance Use Treatment, Recovery, Behavioral/Mental Health	21
Medical Care/Dental Care/Health Insurance	30
Infectious Disease (Viral Hepatitis/HIV/STD) Testing & Linkage to	48
Care	
Basic Needs/General Assistance (Housing and Rental)/Food	90
Other	28
Total Referrals Made	2,507

CP + C M M M M C C C C C												
Clients Served	Male	Male		Female	Female	Female	Unknown/Other	Unknown/Other	Unknown/Other			
	18-25	26-49	50+	18-25	26-49	50+	18-25	26-49	50+			
Hispanic/Latino	<6	5	<6	<6	<6	<6	0	<6	0			
Non-Hispanic/ Latino	28	326	29	26	245	21	<6	11	<6			
TOTAL	*	331	*	*	*	*	<6	*	<6			
Clients Served	Male	Male	Male	Female	Famala	Famala	Unknown/Other	Unknown/Other	Unknown/Other			
Chenis Serveu	18-25	26-49	50+	18-25	Female 26-49	Female 50+	18-25	26-49	50+			
American Indian/ Alaska Native	0	6	<6	0	7	<6	0	0	0			
Asian	0	<6	0	0	0	0	0	0	0			
Black/African American	0	<6	0	0	0	0	0	0	0			
Hawaiian/ Pacific Islander	0	0	0	0	0	0	0	0	0			
White	27	320	28	27	239	18	0	10	0			
Other	<6	<6	0	0	<6	<6	0	0	0			
Multi-race	0	0	0	0	0	0	0	0	0			
Unknown	0	<6	0	0	0	0	<6	<6	<6			
TOTAL	*	331	*	*	*	*	<6	*	<6			

^{*} Due to sensitivity of data, fewer than six encounters are suppressed to avoid identification

Appendix M: MaineGeneral Medical Center – Augusta 11/1/2023 – 10/31/2024

Operator: MaineGeneral Medical Center Location of Site: 9 Green Street, Augusta

Established Date: December 2004

Indicator	Quantity
Total enrolled	1,267
New enrollees, total	149
Number of HIV Tests conducted	45
Number of rapid antibody HCV tests conducted	41
Number of syringes disposed, total	161,448
Syringes distributed, total	201,331
Total exchanges	1,112
Total referrals made	3,034
Number of encounters of naloxone distribution	378

Number of Referrals Made	Quantity
Education Support	128
Legal Assistance	0
Wound Care	358
Naloxone Distribution & Education	443
Syringe Exchange Programs	0
Peer Support	0
Overdose Aftercare	0
Case Management	0
Drug Checking Supplies & Education	906
Transportation	2
Financial Education	0
Intimate Partner Violence	0
Substance Use Treatment, Recovery, Behavioral/Mental Health	7
Medical Care/Dental Care/Health Insurance	23
Infectious Disease (Viral Hepatitis/HIV/STD) Testing & Linkage to	166
Care	
Basic Needs/General Assistance (Housing and Rental)/Food	995
Other	6
Total Referrals Made	3,034

Clients Served	Male 18-25	Male 26-49	Male 50+	Female 18-25	Female 26-49	Female 50+	Unknown/Other 18-25	Unknown/Other 26-49	Unknown/Other 50+
Hispanic/Latino	0	<6	<6	0	<6	0	0	<6	0
Non-Hispanic/ Latino	9	133	25	<6	121	12	<6	<6	0
TOTAL	9	*	*	<6	*	12	<6	<6	0

Cliente Conned	Male	Male	Male	Female	ъ .	ъ .	T. 1 (0.1	T. 1 (0.1	T. 1 (0.1)
Clients Served					Female	Female	Unknown/Other	Unknown/Other	Unknown/Other
	18-25	26-49	50+	18-25	26-49	50+	18-25	26-49	50+
American Indian/ Alaska Native	0	<6	<6	0	<6	<6	0	0	0
Asian	0	0	0	0	<6	0	0	0	0
Black/African American	0	<6	<6	0	0	<6	0	0	0
Hawaiian/ Pacific Islander	0	0	0	0	0	0	0	0	0
White	9	127	22	<6	120	9	<6	<6	0
Other	0	<6	0	0	<6	0	0	0	0
Multi-race	0	<6	0	0	0	0	0	0	0
Unknown	0	<6	<6	0	0	<6	0	<6	0
TOTAL	9	*	*	<6	*	12	<6	<6	0

^{*} Due to sensitivity of data, fewer than six encounters are suppressed to avoid identification

$Appendix\ N:\ Maine General\ Medical\ Center-Waterville\ 11/1/2023-10/31/2024$

Operator: MaineGeneral Medical Center

Location of Site: Thayer Center for Health, 149 North Street, Terrace Level, Waterville

Established Date: 2018

Indicator	Quantity
Total enrolled	308
New enrollees, total	94
Number of HIV Tests conducted	27
Number of rapid antibody HCV tests conducted	25
Number of syringes disposed, total	105,339
Syringes distributed, total	126,828
Total exchanges	565
Total referrals made	1,832
Number of encounters of naloxone distribution	396

Number of Referrals Made	Quantity
Education Support	26
Legal Assistance	0
Wound Care	209
Naloxone Distribution & Education	287
Syringe Exchange Programs	0
Peer Support	3
Overdose Aftercare	0
Case Management	0
Drug Checking Supplies & Education	517
Transportation	0
Financial Education	0
Intimate Partner Violence	0
Substance Use Treatment, Recovery, Behavioral/Mental Health	5
Medical Care/Dental Care/Health Insurance	4
Infectious Disease (Viral Hepatitis/HIV/STD) Testing & Linkage to	270
Care	
Basic Needs/General Assistance (Housing and Rental)/Food	501
Other	10
Total Referrals Made	1,832

Clients Served	Male 18-25	Male 26-49	Male 50+	Female 18-25	Female 26-49	Female 50+	Unknown/Other 18-25	Unknown/Other 26-49	Unknown/Other 50+
Hispanic/Latino	0	0	<6	0	<6	0	0	0	0
Non-Hispanic/ Latino	<6	99	13	<6	40	14	<6	<6	0
TOTAL	<6	99	*	<6	*	14	<6	<6	0

	373	37.1	37.1	h 1					
Clients Served	Male	Male		Female	Female	Female	Unknown/Other	Unknown/Other	Unknown/Other
	18-25	26-49	50+	18-25	26-49	50+	18-25	26-49	50+
American Indian/ Alaska Native	0	<6	<6	0	0	0	0	0	0
Asian	0	0	0	<6	0	0	0	0	0
Black/African American	0	<6	0	0	0	0	0	0	0
Hawaiian/ Pacific Islander	0	0	0	0	0	0	0	0	0
White	<6	91	11	<6	41	14	0	0	0
Other	0	0	0	0	0	0	0	0	0
Multi-race	0	0	<6	0	0	0	0	0	0
Unknown	0	<6	0	<6	0	0	<6	<6	0
TOTAL	<6	99	*	<6	*	14	<6	<6	0

^{*} Due to sensitivity of data, fewer than six encounters are suppressed to avoid identification

Appendix O: MaineHealth Franklin County Syringe Exchange – Farmington & Strong

11/02/23-10/31/24 Operator: MaineHealth

Location of Site: Farmington & Strong

Established Date: 2023

Indicator	Quantity
Total enrolled	3
New enrollees, total	3
Number of HIV Tests conducted	0
Number of rapid antibody HCV tests conducted	0
Number of syringes disposed, total	3,010
Syringes distributed, total	2,542
Total exchanges	32
Total referrals made	0
Number of encounters of naloxone distribution	3

Note: Franklin County Syringe Exchange began operating in 2024 but was not funded by Maine CDC and therefore not obligated to collect the same level of data as other funded SSPs.

Appendix P: Needlepoint Sanctuary – Bangor 11/1/2023-10/31/2024

Operator: Needlepoint Sanctuary

Location of Site: Bangor Established Date: 2024

Indicator	Quantity
Total enrolled	914
New enrollees, total	241
Number of HIV Tests conducted	0
Number of rapid antibody HCV tests conducted	0
Number of syringes disposed, total	129,518
Syringes distributed, total	170,500
Total exchanges	1,102
Total referrals made	2,407
Number of encounters of naloxone distribution	508

Number of Referrals Made	Quantity
Education Support	1
Legal Assistance	45
Wound Care	207
Naloxone Distribution & Education	408
Syringe Exchange Programs	588
Peer Support	142
Overdose Aftercare	2
Case Management	10
Drug Checking Supplies & Education	213
Transportation	46
Financial Education	0
Intimate Partner Violence	1
Substance Use Treatment, Recovery, Behavioral/Mental Health	40
Medical Care/Dental Care/Health Insurance	16
Infectious Disease (Viral Hepatitis/HIV/STD) Testing & Linkage to	94
Care	
Basic Needs/General Assistance (Housing and Rental)/Food	594
Other	3
Total Referrals Made	2,407

Clients Served	Male 18-25	Male 26-49	Male 50+	Female 18-25	Female 26-49	Female 50+	Unknown/Other 18-25	Unknown/Other 26-49	Unknown/Other 50+
Hispanic/Latino	0	0	0	<6	0	0	0	0	<6
Non-Hispanic/ Latino	23	35	14	15	31	12	245	350	161
TOTAL	23	35	14	*	31	12	245	350	*

CL:	Mala	Male	Mala	Farmala			TT 1 (0.1	TT 1 (0.1	77.1 (0.1
Clients Served	Male			Female	Female	Female	Unknown/Other	Unknown/Other	Unknown/Other
	18-25	26-49	50+	18-25	26-49	50+	18-25	26-49	50+
American Indian/ Alaska Native	<6	<6	<6	<6	<6	0	<6	<6	<6
Asian	0	0	0	0	0	0	0	0	0
Black/African American	<6	<6	<6	0	0	0	<6	<6	0
Hawaiian/ Pacific Islander	0	0	0	0	0	0	0	0	0
White	20	32	12	13	28	12	32	62	16
Other	0	0	0	0	0	0	0	0	0
Multi-race	0	<6	0	0	<6	0	0	0	0
Unknown	0	0	0	0	0	0	208	283	143
TOTAL	23	35	14	*	31	12	245	350	*

^{*} Due to sensitivity of data, fewer than six encounters are suppressed to avoid identification

Appendix Q: Needlepoint Sanctuary – Milo 11/1/2023-10/31/2024

Operator: Needlepoint Sanctuary

Location of Site: Milo Established Date: 2024

Indicator	Quantity
Total enrolled	19
New enrollees, total	16
Number of HIV Tests conducted	42
Number of rapid antibody HCV tests conducted	0
Number of syringes disposed, total	0
Syringes distributed, total	0
Total exchanges	0
Total referrals made	24
Number of encounters of naloxone distribution	20

Number of Referrals Made	Quantity
Education Support	0
Legal Assistance	0
Wound Care	0
Naloxone Distribution & Education	20
Syringe Exchange Programs	2
Peer Support	1
Overdose Aftercare	0
Case Management	0
Drug Checking Supplies & Education	1
Transportation	0
Financial Education	0
Intimate Partner Violence	0
Substance Use Treatment, Recovery, Behavioral/Mental Health	0
Medical Care/Dental Care/Health Insurance	0
Infectious Disease (Viral Hepatitis/HIV/STD) Testing & Linkage to	0
Care	
Basic Needs/General Assistance (Housing and Rental)/Food	0
Other	0
Total Referrals Made	24

Enrollee Demographics (encounters)											
Clients Served	Male 18-25	Male 26-49	Male 50+	Female 18-25	Female 26-49	Female 50+	Unknown/Other 18-25	Unknown/Other 26-49	Unknown/Other 50+		
Hispanic/Latino	0	0	0	0	0	0	0	0	0		
Non-Hispanic/ Latino	<6	<6	<6	<6	9	<6	0	0	0		
TOTAL	<6	<6	<6	<6	9	<6	0	0	0		
Clients Served	Male 18-25	Male 26-49	Male 50+	Female 18-25	Female 26-49	Female 50+	Unknown/Other 18-25	Unknown/Other 26-49	Unknown/Other 50+		
American Indian/ Alaska Native	0	0	0	0	0	0	0	0	0		
Asian	0	0	0	0	0	0	0	0	0		
Black/African American	0	0	0	0	0	0	0	0	0		
Hawaiian/ Pacific Islander	0	0	0	0	0	0	0	0	0		
White	<6	<6	<6	<6	9	<6	0	0	0		
Other	0	0	0	0	0	0	0	0	0		
Multi-race	0	0	0	0	0	0	0	0	0		
Unknown	0	0	0	0	0	0	0	0	0		

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TOTAL

Appendix R: Portland Public Health "The Exchange" -Portland 11/1/2023-10/31/2024

Operator: Portland Public Health

On site exchanges: 39 Forest Ave, Portland, ME

Established Date: 1998

Indicator	Quantity
Total enrolled	2801
New enrollees, total	58
Number of HIV Tests conducted	286
Number of rapid antibody HCV tests conducted	199
Number of syringes disposed, total	577,517
Syringes distributed, total	952,411
Total exchanges	8,620
Total referrals made	6,034
Number of encounters of naloxone distribution	2,842

Number of Referrals Made	Quantity
Education Support	0
Legal Assistance	0
Wound Care	339
Naloxone Distribution & Education	0
Syringe Exchange Programs	1
Peer Support	10
Overdose Aftercare	43
Case Management	0
Drug Checking Supplies & Education	0
Transportation	19
Financial Education	0
Intimate Partner Violence	0
Substance Use Treatment, Recovery, Behavioral/Mental Health	538
Medical Care/Dental Care/Health Insurance	376
Infectious Disease (Viral Hepatitis/HIV/STD) Testing & Linkage to Care	1,287
Basic Needs/General Assistance (Housing and Rental)/Food	1,858
Other	450
Total Referrals Made	6,034

Clients Served	Male 18-25	Male 26-49	Male 50+	Female 18-25	Female 26-49	Female 50+	Unknown/Other 18-25	Unknown/Other 26-49	Unknown/Other 50+
Hispanic/Latino	19	292	57	25	96	19	0	0	0
Non-Hispanic/ Latino	120	3,805	559	128	1,771	123	107	1,082	240
TOTAL	139	4,097	616	153	1,867	142	107	1,082	240

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Clients Served	Male	Male		Female	Female	Female	Unknown/Other	Unknown/Other	Unknown/Other
	18-25	26-49	50+	18-25	26-49	50+	18-25	26-49	50+
American Indian/ Alaska Native	0	0	0	0	<6	0	0	0	0
Asian	0	14	0	0	<6	<6	0	0	0
Black/African American	0	144	10	29	64	<6	0	0	0
Hawaiian/ Pacific Islander	0	0	0	0	0	0	0	0	0
White	131	3,932	611	127	1,675	107	7	57	23
Other	0	44	20	0	<6	<6	0	0	0
Multi-race	<6	23	0	<6	14	0	0	<6	0
Unknown	0	28	<6	<6	19	5	100	1,023	217
TOTAL	132	4,185	*	160	1,779	115	107	*	240

^{*} Due to sensitivity of data, fewer than six encounters are suppressed to avoid identification

Appendix S: Spurwink - Lewiston 11/1/2023 - 10/31/2024

Operator: Spurwink (Previously Tri-County Mental Health Services)

Location: Lewiston Established Date: 2020

Indicator	Quantity
Total enrolled	464
New enrollees, total	64
Number of HIV Tests conducted	0
Number of rapid antibody HCV tests conducted	0
Number of syringes disposed, total	34,878
Syringes distributed, total	36,550
Total exchanges	145
Total referrals made	20
Number of encounters of naloxone distribution	178

Number of Referrals Made	Quantity
Education Support	0
Legal Assistance	1
Wound Care	0
Naloxone Distribution & Education	0
Syringe Exchange Programs	0
Peer Support	0
Overdose Aftercare	0
Case Management	1
Drug Checking Supplies & Education	0
Transportation	0
Financial Education	0
Intimate Partner Violence	0
Substance Use Treatment, Recovery, Behavioral/Mental Health	12
Medical Care/Dental Care/Health Insurance	0
Infectious Disease (Viral Hepatitis/HIV/STD) Testing & Linkage to	0
Care	
Basic Needs/General Assistance (Housing and Rental)/Food	3
Other	3
Total Referrals Made	20

——————————————————————————————————————										
Clients	Male	Female	Unknown							
Served										
White	103	128	0							
Black	<6	0	0							
Unknown	0	0	16							
Total	*	128	16							

Note: Full demographic data unavailable.

^{*} Due to sensitivity of data, fewer than six encounters are suppressed to avoid identification

$Appendix\ T:\ Wabanaki\ Public\ Health\ and\ Wellness-Bangor\ 11/1/2023-10/31/2024$

Operator: Wabanaki Public Health and Wellness Location of Site: 157 Park Street 32A Bangor, ME

Established Date: 2021

Indicator	Quantity
Total enrolled	118
New enrollees, total	108
Number of HIV Tests conducted	62
Number of rapid antibody HCV tests conducted	61
Number of syringes disposed, total	31,128
Syringes distributed, total	16,115
Total exchanges	444
Total referrals made	781
Number of encounters of naloxone distribution	575

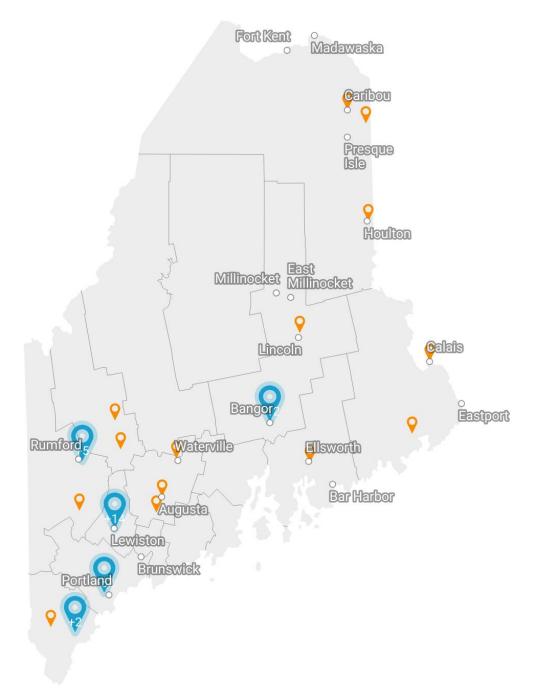
Number of Referrals Made	Quantity
Education Support	0
Legal Assistance	0
Wound Care	2
Naloxone Distribution & Education	575
Syringe Exchange Programs	0
Peer Support	0
Overdose Aftercare	0
Case Management	0
Drug Checking Supplies & Education	66
Transportation	0
Financial Education	0
Intimate Partner Violence	1
Substance Use Treatment, Recovery, Behavioral/Mental Health	12
Medical Care/Dental Care/Health Insurance	0
Infectious Disease (Viral Hepatitis/HIV/STI) Testing & Linkage to	121
Care	
Basic Needs/General Assistance (Housing and Rental)/Food	1
Other	3
Total Referrals Made	781

Clients Served	Male 18-25	Male 26-49	Male 50+	Female 18-25	Female 26-49	Female 50+	Unknown/Other 18-25	Unknown/Other 26-49	Unknown/Other 50+
Hispanic/Latino	0	<6	<6	0	7	0	0	<6	0
Non-Hispanic/ Latino	<6	203	16	0	129	<6	0	71	0
TOTAL	<6	*	*	0	136	<6	0	*	0

Cli4- C I	Mala	Mala	Mala	Farmala			TT 1 (0.1	TT 1 (0.1	T. 1 (0.1
Clients Served	Male	Male		Female	Female	Female	Unknown/Other	Unknown/Other	Unknown/Other
	18-25	26-49	50+	18-25	26-49	50+	18-25	26-49	50+
American Indian/ Alaska Native	<6	12	<6	0	16	<6	0	0	0
Asian	0	0	0	0	0	0	0	0	0
Black/African American	0	0	0	0	0	0	0	0	0
Hawaiian/ Pacific Islander	0	0	0	0	0	0	0	0	0
White	0	188	15	0	113	<6	0	<6	0
Other	0	0	0	0	7	0	0	0	0
Multi-race	0	<6	0	0	0	0	0	0	0
Unknown	0	<6	0	0	0	0	0	68	0
TOTAL	<6	*	*	0	136	*	0	*	0

^{*} Due to sensitivity of data, fewer than six encounters are suppressed to avoid identification

Appendix U: Syringe Disposal Box Locations Map 2.1 Syringe Disposal Locations



Created with Datawrapper

For an interactive version of the map, follow this link: https://datawrapper.dwcdn.net/00dcv/13/

Androscoggin County		
Location	Street	Town
Spurwink (Monday-Friday 12 pm to 3 pm)	1155 Lisbon Street	Lewiston
Church of Safe Injection (call for hours)	195 Main Street	Lewiston
Lamp Post (left of main building entrance)	57 Birch Street	Lewiston
Community garden fence	68 Knox Street	Lewiston
Kennedy Park (box is mounted at the top of stairway at Bates Street)	120 Park Street	Lewiston
Post near the greenspace trash receptable	42 Walnut Street	Lewiston
Sunnyside Park (box is mounted on a sign post to the right of the entrance)	132 Winter Street	Lewiston
Oak Street Parking Garage (box is mounted on sign post)	1 Oak Street	Lewiston
Dufresne Plaza (box is mounted on lamp post near trash receptable at top of walkway ramp)	59 Park Street	Lewiston
Androscoggin Bank (by the drive-up entrance)	17 Park Street	Lewiston
Simard-Payne Park (box is mounted on a lamp post near elevated ramp)	46 Beach Street	Lewiston
East side of Canal Street (box is mounted on single globe lamp 100 feet from Main street)	Canal Street	Lewiston
Community Credit Union	144 Pine Street	Lewiston
Corner of Middle and Main Street	105 Middle Street	Lewiston
Aroostook County		
Location	Street	Town
Caribou Police Department	25 High Street	Caribou
Fort Fairfield Police Department	18 Community Center Dr.	Fort Fairfield

Houlton Police Department	97 Military Street	
Cumberland County		
Location	Street	Town
Cumberland Service Plaza Public Bathroom	I95 Exit 58 Southbound	Cumberland
Gray Service Plaza Public Bathroom	I95 Exit 59 Northbound	Gray
Peaks Island Community Center (bathroom)	129 Island Avenue	Peaks Island
Peaks Island Casco Bary Ferry Parking Lot (bathroom)	Welch Street	Peaks Island
Portland Public Health Syringe Service Program (Monday-Friday 9 am to 4 pm)	39 Forest Avenue	Portland
Portland Public Health Syringe Service Program Outreach Location (M/W 2-4 pm and Friday 1-3 pm and Saturday 8-9 am)	39 Forest Avenue	Portland
Maine State Pier Ferry Terminal Commuter Center (bathrooms)	56 Commercial Street	Portland
Riverton Trolley Park (inside vault bathroom)	822 Riverside Street	Portland
Riverton Community Garden (inside vault bathroom)	45 Verrill Street	Portland
Evergreen Cemetery Ponds (inside vault bathroom)	672 Stevens Avenue	Portland
Deering High School (inside vault bathroom near the tennis courts)	370 Stevens Avenue	Portland
Payson Park Basketball Court (inside vault bathroom)	Baxter Blvd	Portland
Dougherty Field (bathroom at the corner of the skate park)	85 St James Street	Portland
Dougherty Field Skate Park (on post)	85 St James Street	Portland
Valley Street Dog Park	140 Valley Street	Portland
Western Promenade (attached to Big Belly solar trashcan)	Western Promenade	Portland

Cumberland County, cont.		
Deering Oaks Park (box mounted on fence)	Deering Avenue	Portland
Deering Oaks Park (on Big Belly trashcan between playground and baseball field)	Deering Avenue	Portland
Deering Oaks Park, Ravine Bridge (on trashcan)	Deering Avenue	Portland
Deering Oaks Park, Mellen Street Path (on light post near Mellen Street entrance)	Mellen Street	Portland
Deering Oaks Park, Rose Circle (on light post next to path from Rose Circle to Park Ave.)	Park Avenue	Portland
Deering Oaks Park, Rose Circle (inside portable bathroom)	Park Avenue	Portland
Edward's Lot, Deering Oaks Park (on sigh post at intersection of High Street and Park Street)	Intersection of High Street and Park Street	Portland
Telephone pole near sidewalk	Intersection of Congress Street and Mellen Street	Portland
Tyng/Tate Street Park (on York Street entrance of playground)	Tate Street and York Street	Portland
Harbor View Park (light post next to trail leading to Commercial Street)	Commercial Street	Portland
Congress Square Park (lamp post)	Congress Street and High Street	Portland
Fish Pier (inside public bathroom)	320 Commercial St	Portland
Spring Street Parking Garage (inside parking garage bathroom)	42 Spring Street	Portland
Spring Street Public Bathroom (inside bathroom)	Spring Street	Portland
Portland Public Market (on telephone pole in front of slab)	Intersection of Preble Street and Portland Public Market	Portland

Cumberland County, cont.		
MaineHealth Preble Street Learning Collaborative (on light post in front of building)	20 Portland Street	Portland
Bayside Trail, Stone Circle (on light post near Stone Circle seating area	Sewage Plant Road	Portland
Bayside Trail (on Big Belly trashcan at trail intersection with Chestnut Street)	Chestnut Street	Portland
Bayside Trail (on light post behind Dunkin Donuts)	191 Marginal Way, Suite D	Portland
Bayside Trail (Fox and North Boyd Street trail crossing)	Intersection of Fox St. and North Boyd St.	Portland
Fox Field and Playground (inside public bathroom)	Fox Street	Portland
Portland Public Library (on fence along Elm Street, in front of library windows)	5 Monument Square	Portland
Portland Public Library (on fence along Elm Street)	5 Monument Square	Portland
Bayside Community Garden (on garden shed)	Chestnut Street	Portland
Boyd Street Garden (on garden shed)	2 Boyd Street	Portland
Peppermint Park (on Big Belly trashcan at Cumberland Avenue park entrance)	136 Cumberland Avenue	Portland
Common Space (inside building, drop off during business hours)	103 India Street	Portland
Portland Food Co-Op (inside bathroom)	290 Congress Street	Portland
First Parish Church (Freshman Alley 1-attached to fence)	425 Congress Street	Portland
First Parish Church (Freshman Alley 2-attached to fence)	425 Congress Street	Portland
Cumberland County, cont.		

Stone Street Playground (on Big Belly trashcan in playground)	Stone Street	Portland
East End Beach (on light post near bath house)	Cutter Street	Portland
Eastern Promenade Public Basketball Court (inside bathroom)	Cutter Street	Portland
Community Policing Center	192 Brown Street	Westbrook
Cross and Central Street	Intersection of Cross and Central Street	Westbrook
Riverbank Park	Main Street	Westbrook
Saccarappa Park (on fence)	901 Main Street	Westbrook

Franklin County		
Location	Street	Town
Healthy Community Coalition	105 Mt Blue Circle, Suite 1	Farmington
Healthy Community Coalition Mobile Health (Church of the Nazarene Parking Lot)	78 North Main Street	Strong

Hancock County		
Location	Street	Town
Health Equity Alliance (call for hours)	5 Long Lane	Ellsworth

Kennebec	County
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Location	Street	Town
Next Step Syringe Exchange (Mon, Tues, and Thurs 8:30 am to 4:30 pm; Wed 11 am-4 pm; Friday 12:30 pm to 4:30 pm)	9 Green Street, 2 nd Floor	Augusta
Next Step Syringe Exchange (Mon and Wed 8:30 am to 4:30 pm; Tues and Thurs 12:30 pm to 4:30 pm; Friday 10 am to 4:30 pm)	149 North Street, Room 0157 on Terrace Level of the Thayer Center for Health	Waterville
West Gardiner Plaza (inside bathroom)	I95 Exit 102 Northbound I95 Exit 103 Southbound I-295 Exit 51	West Gardiner

Oxford County

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Location	Street	Town
Med-Care	290 Highland Terrace	Mexico
Glenn Gordon (OPTIONS Liaison)	Serves entire Oxford County	
Cumberland Farms (restroom)	251 Main Street	Norway
Larry Labonte Recovery Center	412 Wald Street	Rumford
Rumford Police Department	150 River Street	Rumford
Ink Maine	432 Hancock Street	Rumford
Maine Access Points (3 rd Thursday of each month from 10 am to 4:00 pm)	218 Penobscot Street	Rumford

Penobscot County

Location	Street	Town
Health Equity Alliance (call for hours)	304 Hancock St., Suite 3B	Bangor
Wabanaki Public Health and Wellness (Mon-Fri 9 am to 4 pm)	157 Park Street	Bangor
Talbot Park	2 nd Street	Bangor
Kenduskeag Stream Trail (end of pedestrian bridge)	324 Harlow Street	Bangor
Kenduskeag Stream Foot Bridge (on stand alone pole near county courthouse)	Harlow Street	Bangor
Cleveland Street (two disposal boxes)	Cleveland Street	Bangor
Second Street Park (on stand alone pole near cement retaining wall near Shaw's)	2 nd Street	Bangor
Bangor Waterfront Dock (left of Sea Dog Brewing)	Front Street	Bangor
Broad Street Park (on stand alone pole near 4-hour parking spots)	Broad Street	Bangor
Coe Park	Court Street	Bangor
Gateway Park (attached to picnic table near the edge of parking area)	Valley Avenue	Bangor
Stillwater Avenue (near Northern Light Acadia Hospital)	Stillwater Avenue	Bangor
Davenport Park (next to the Bangor Homeless Shelter)	Cedar Street	Bangor
Save a Life Recovery Center	19 VFW Street	Lincoln

Washington County		
Location	Street	Town
Maine Access Points (call ahead for hours)	Waterfront Pier	Calais
Maine Access Points (call ahead for hours)	25 Main Street, Unit #15	Machias

York County		
Location	Street	Town
Kennebunk Service Plaza Public Bathrooms	I95 Exit 25 Southbound I95 Exit 24 Northbound	Kennebunk
Maine Access Points (Tues and Thurs from 12 pm to 4 pm)	840 Main Street	Sanford