



Office of the City Manager

PUBLIC HEARING
June 27, 2023

To: Honorable Mayor and Members of the City Council
From: Dee Williams-Ridley, City Manager
Submitted by: Lisa Warhuus, Director, Health, Housing, and Community Services
Subject: Biennial Syringe Services Report

RECOMMENDATION

Conduct a public hearing and upon conclusion, accept the Biennial Syringe Services Report.

SUMMARY

In accordance with Health and Safety Code section 121349.3 this biennial report details the status of clean needle and syringe exchange programs operating in the City of Berkeley. The report will include relevant statistics on bloodborne infections associated with needle sharing activity and the use of public funds for these programs.

Syringe exchange is a documented public health intervention that reduces the transmission of blood-borne pathogens and also reduces the number of improperly discarded syringes in the community. Syringe service programs (SSPs) offer many services in addition to providing syringes and sterile injection equipment. These usually include overdose education and naloxone distribution, HIV and hepatitis C testing, and referrals to drug treatment, housing, and mental health services. Most SSPs also provide first aid and basic supplies, such as clean socks and bottled water, to meet the needs of people experiencing homelessness.

There are currently two syringe exchange programs operating in the City of Berkeley: Berkeley Needle Exchange Emergency Distribution (NEED) and the Berkeley Free Clinic.

CURRENT SITUATION AND ITS EFFECTS

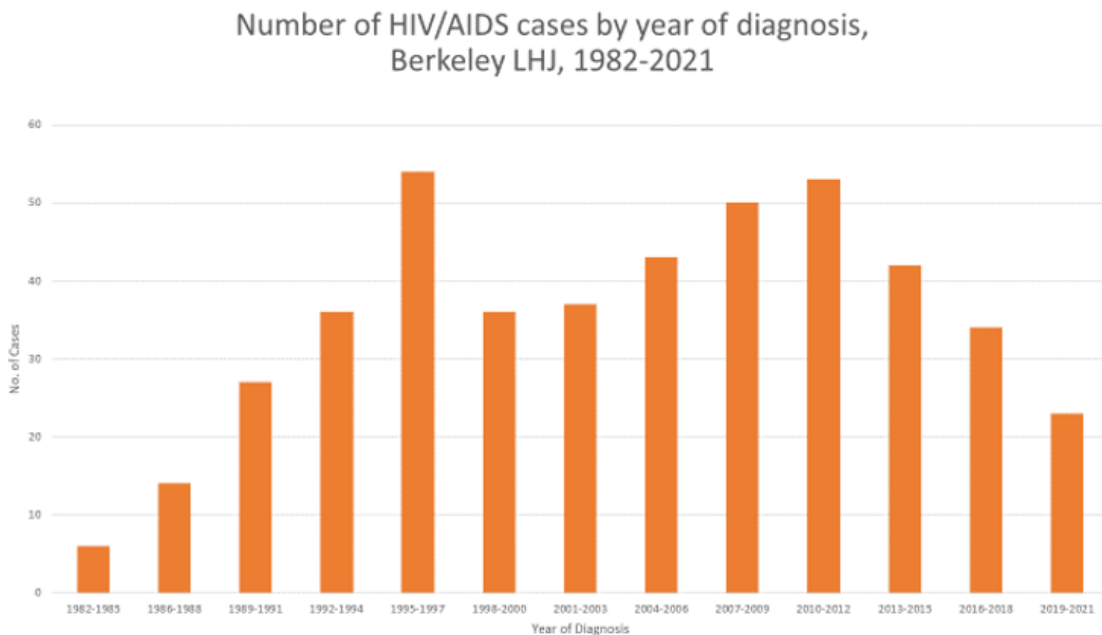
Since the late 1980s, California SSPs have been providing sterile syringes, collecting used ones, and acting as points of access to healthcare and providing aid to people who use drugs. SSPs are also essential components of California's infectious disease prevention strategy. They have played a crucial role in reducing HIV infections in the state and preventing the transmission of other blood-borne diseases and their complications. In fact, SSPs have been instrumental in significantly reducing the transmission of HIV, hepatitis B and C viruses, and preventing skin and soft tissue infections among people who inject drugs.

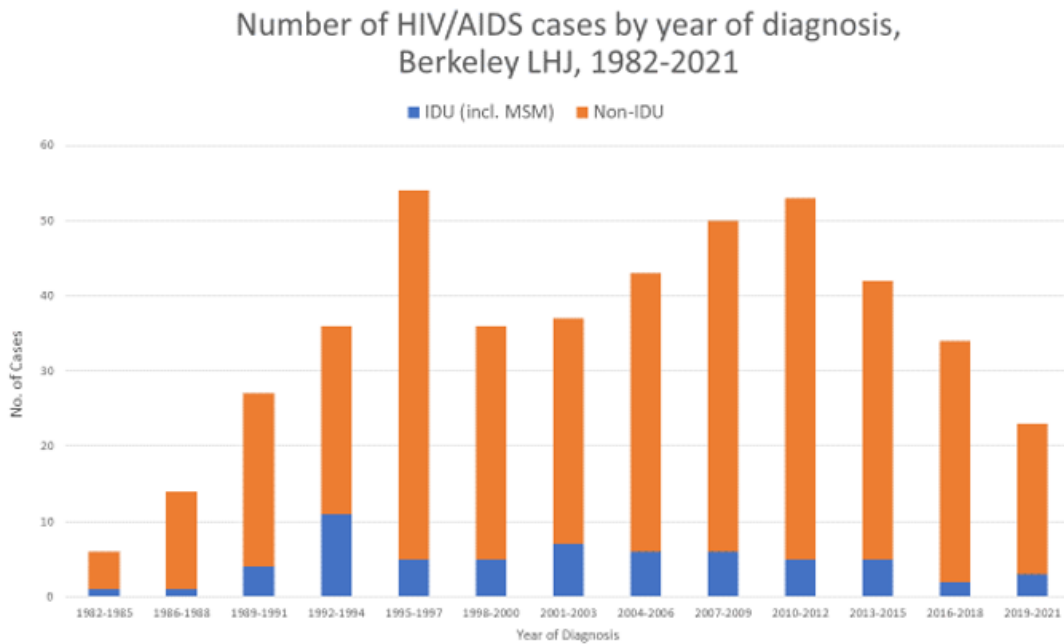
In addition to their role in infectious disease prevention, SSPs have also become frontline care providers in California's efforts to prevent drug overdose deaths. Studies have shown that individuals who participate in SSPs are five times more likely to enter drug treatment and three times more likely to reduce or stop injecting compared to those who have never accessed a SSP.

Reducing Disease Transmission:

HIV/AIDS:

After a rise and peak of overall HIV/AIDS infections in 2010-2012, cases have continued a downward trend for the last 10 years. HIV/AIDS cases due to injection drug use (IDU) have been on average below 5 cases per year and have continued a downward trend since the early 2000s.





Hepatitis C:

The graph below shows newly reported cases of chronic hepatitis C among City of Berkeley residents from 2011 through 2021. The increase in cases starting in 2013 is likely due to the initiation of statewide electronic laboratory reporting (ELR) and auto processing of ELR hepatitis C data in October and December, 2013, respectively. The increase in probable cases in 2018 reflects a change in the Council of State and Territorial Epidemiologist/Centers for Disease Control and Prevention case definition for chronic hepatitis C in 2016. This change resulted in fewer cases meeting criteria for a confirmed case in 2018 compared to previous reporting years. Cases reported in 2012-2015 could be classified as confirmed with only a positive antibody result value above a certain threshold. In 2016, such cases were considered probable and ribonucleic acid (RNA) detection was necessary for confirmation. Cases in this report were classified based on the case definition current at the time of the case report. Case counts from 2019 to 2021 show a decrease or plateau in cases.

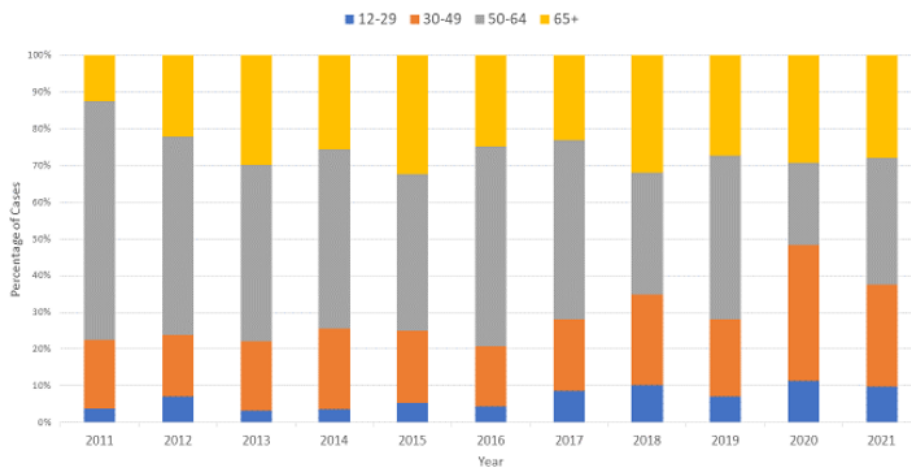
Number of newly reported cases of chronic hepatitis C by resolution status, Berkeley LHJ 2011-2021



*As of January 2016, a positive hepatitis C virus antibody result with a high signal-to-cut-off ratio was considered probable; ribonucleic acid (RNA) was required for a confirmed case.

The graph below shows the age distribution of chronic hepatitis C cases in City of Berkeley residents. Since 2017, there has been a shift in the age predominance of hepatitis C cases, with an increase in cases among individuals aged 30 and younger, as opposed to the previous trend where the majority of cases were reported in those aged 50 and older.

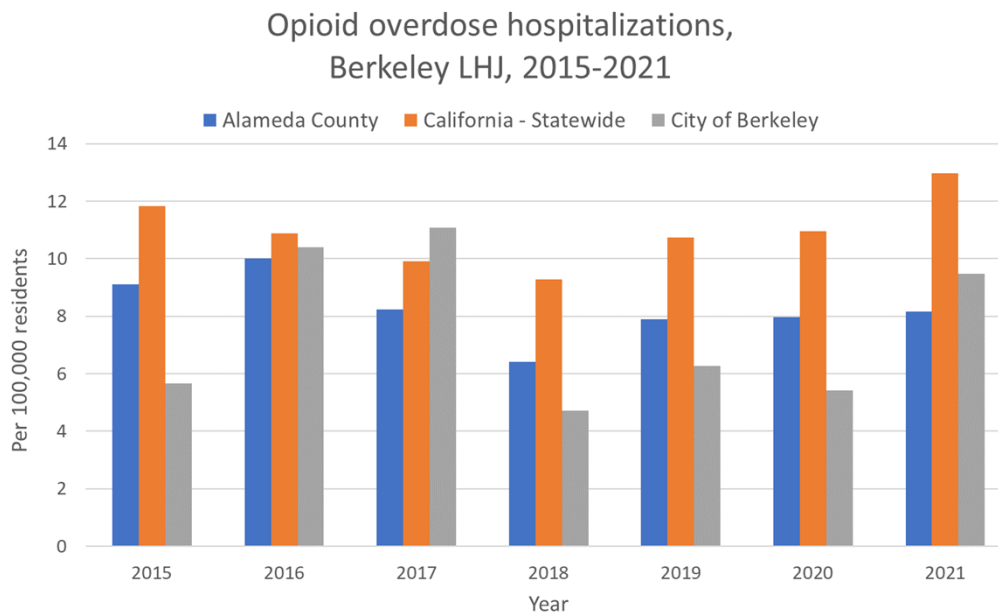
Chronic Hepatitis C – Age Distribution of Newly Reported Cases, Berkeley LHJ, 2011-2021



Opioid Overdose:

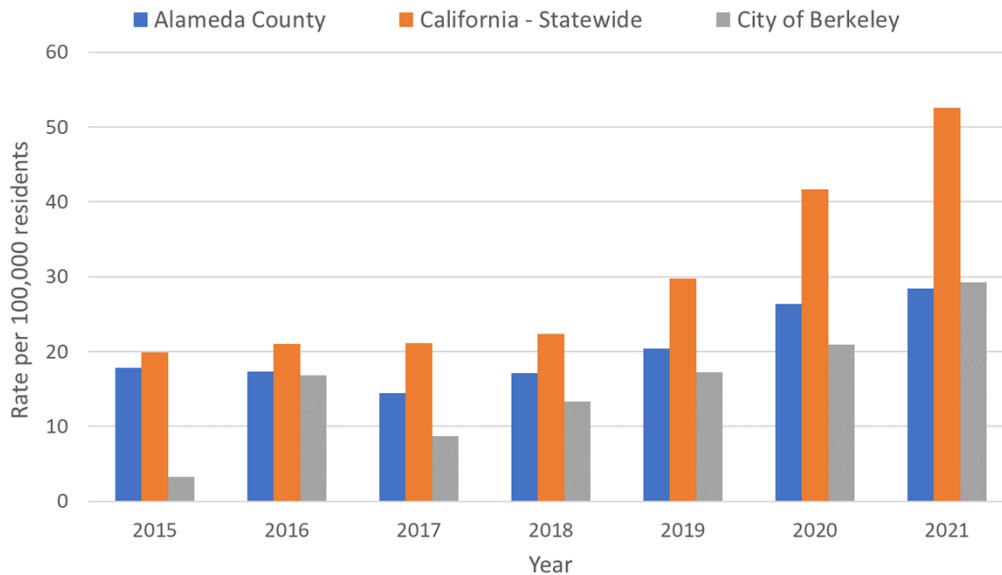
Using hospitalization and emergency department (ED) data from the Department of Health Care Access and Information (HCAI), trends in opioid overdose diagnoses among City of Berkeley residents can be monitored. Although opioid hospitalizations and ED visits are not necessarily linked with injection drug use, examining these patterns can provide useful background for evaluating harm reduction methods such as needle exchange services. The opioid crisis is a complex public health emergency that has gripped communities across the United States, including California. It stems from the widespread misuse and addiction to both prescription opioids, such as oxycodone and hydrocodone, and illicit opioids like heroin and fentanyl.

The graph below shows crude incident rates of opioid overdose hospitalizations for Berkeley residents with Alameda County and Statewide estimates for comparison. Berkeley's opioid overdose hospitalization rates ranged from a low of 4.7 per 100,000 in 2018 and to a high of 11.0 per 100,000 in 2017. The lowest rate was in 2018, while the highest was in 2017.



The next graph below shows crude rates of opioid overdose ED visits for Berkeley residents, with comparison rates for Alameda County and all of California. For the last five years, rates for Berkeley have increased, from 8.7 per 100,000 in 2017 to 29.2 per 100,000 in 2021. This over threefold increase mirrors a similar pattern of increasing ED visits for Alameda County and California.

Opioid overdose ED visits,
Berkeley LHM, 2015-2021



Syringe Exchange Program Data:

Berkeley Needle Exchange Emergency Distribution (NEED) (01/01/22-12/31/22)

Program description:

NEED is a volunteer-based collective that was started in September 1990 by a group of HIV positive persons, people in recovery, and health activists as an underground program operating out of a baby carriage on the corner of Hearst and San Pablo Avenues in Berkeley.

Today, NEED operates from a van at three neighborhood sites each week, offering free and anonymous services in a client-centered manner. Their focus is on preventing infectious diseases and improving the physical, spiritual, and political health of drug users. In response to the rising number of overdoses among injection drug users, NEED also provides overdose prevention education.

In addition to syringes, NEED carries an assortment of harm reduction supplies including safer sex, wound care, and hygiene supplies. NEED provides information and referrals for medical, housing, social support, and treatment programs. Once a week, the NEED site is located across the street the Berkeley Free Clinic that provides free, anonymous hepatitis testing and vaccination.

Exchange data:

- Number of individuals served: 6,089
- Number of syringes distributed: 515,361
- Numbers of syringes collected (note, this is often less as many communities have other alternatives for disposal): 207,490
- Number of overdose kits (Narcan) provided: 2,135
- Number of overdose reversals reported: 390
- Overdose trainings: 9 group trainings for outside groups and 500 individual trainings*
- Number of referrals to substance use disorder treatment programs: Data not collected
- Number of HIV and HCV tests performed: NEED does not perform HIV/HCV tests but refers individuals to testing services, if requested
- Community served:
 - Demographics of primary exchange participants:
 - Gender
 - Male: 59.85% Female:19.95% Transgender/genderqueer:2.4% Other: 2.2% Declined: 12.8%
 - Race/ethnicity
 - White: 39.2% African American: 17.35% Latino/Hispanic: 10.2% Asian/Pacific Islander: 2.3% Multiracial 5.7% Other: 5.15% Declined: 16.35%
 - Age
 - 24 or younger: 2.15% 25-34: 19.9% 35-44: 20.9% 45-54:18.7% 55-64: 18.25% 65 or older:4.6% Declined: 13.55%

*NEED offers training to anyone who receives naloxone from them. Most of the participants have used and/or been trained in how to use naloxone so they do not need or want training.

Berkeley Free Clinic Syringe Exchange (data from 01/01/22-01/01/23):

Program description:

The Berkeley Free Clinic (BFC) is non-profit community clinic located on Durant Ave. It is operated as a worker-run collective by more than 100 volunteers, that has provided free medical care since opening in 1969. The mission of the BFC is to empower individuals and communities by providing accessible, client-centered health services and information. The BFC offers a variety of services including STI screening and treatment, peer counselling, dental services, vision screening, and local resource navigation and referrals in addition to syringe exchange services. The Clinic is widely known to the Berkeley community as a place to receive harm reduction supplies as well

as hygiene items, food, and water. Their harm reduction services are integrated into the clinical services and include needs-based distribution of services, safer injection supplies, fentanyl test strips, naloxone education and distribution, and wound care supplies.

Exchange data:

- Number of individuals served: 4,500
- Numbers of syringes distributed: 19,800
- Numbers of syringes collected (note, this is often less as many communities have other alternatives for disposal): 10,200
- Number of overdose kits (Narcan) provided: 1,820
- Number of overdose reversals reported: 25
- Overdose trainings: 2
- Number of referrals to substance use disorder treatment programs: 27
- Number of HIV and HCV tests performed: provided but not recorded
- Community served: mostly unhoused, drug of choice: Methamphetamine(crank)/heroin

Use of Public Funds:

NEED receives funding for syringe services supplies from the Public Health Division of Health, Housing, and Community Services Department. The funding is not to exceed \$150,000 over three years (or \$50,000 per year).

Outreach and Support-City of Berkeley Activities and Programs:

The City of Berkeley provides support to the injection drug using population in several ways.

Additional syringe disposal sites:

- The Berkeley Police Department maintains sharps and medication disposal at their office building. <https://resource.stopwaste.org/vendor/berkeley-police-department-berkeley-2100-martin-luther-king-jr-way?itemname=Needles%2B%26amp%3B%2BSyringes>
- The Mental Health Division of Health, Housing and Community Services has a sharps container available for syringes and appropriate items at its adult clinic.

Mental Health Division of Health, Housing, and Community Services (BMH):

- Overdose education and naloxone distribution (NARCAN): The HIV Education and Prevention Project of Alameda County (HEPPAC) has provided trainings to BMH and other community organizations for NARCAN administration and has distributed NARCAN to trained teams. BMH physicians prescribe NARCAN as clinically indicated. BMH also conducts drug screen testing when indicated.
- HIV and hepatitis C testing: As clinically indicated, BMH physicians order HIV and Hep C blood tests for their patients.
- Education/services/accomplishments: Options Recovery has contracted with BMH to provide co-located substance use disorder (SUD) information, education, and services. Options Recovery street outreach is via a contract with HHCS to provide SUD outreach services and referral to SUD programming. BMH is also utilizing Opioid Settlement funds and Mental Health Services Act (MHSA) funding to add a SUD staff person to the Berkeley High School Health Center to provide various SUD, referral, and harm reduction services.
- Referrals to drug treatment: BMH regularly refers to Alameda County SUD ACCESS for services, coordinating care with SUD providers for clients established in care with BMH. BMH also refers patients to various substance use programs including Alcoholics Anonymous, Narcotics Anonymous, Marijuana Anonymous, Nicotine Anonymous, Bonita House, Cronin House, Cherry Hill, Chrysalis, and others.
- Housing, and mental health services: BMH completes intakes for eligible individuals at Bonita House to facilitate access to MH/Dual Diagnosis services, coordinates services and housing assessments for unhoused clients with Bay Area Community Services (BACS), works with Shelter and Care program case managers and staff and partner agencies (e.g. ABODE) to obtain and maintain clients in housing. BMH also assists with linkage to mental health services if someone does not meet BMH criteria for services

Berkeley High School Health Center (BSHHC):

The BSHHC provides a myriad of harm reduction resources to students.

- Fentanyl Strips are provided as a “Grab and Go” item at the BSHHC front desk: The BSHHC provides education about drug use, focusing on overdose prevention and fentanyl information, in partnership with the Harm Education and Reduction Organization (HERO), a student group spearheading an effort to educate their Berkeley High peers.

Through the partnership with HERO and Berkeley High School Health Center, Fentanyl Strips are provided by Kaiser Permanente to HERO and then given to the Health Center to distribute.

- The BSHHC receives Narcan through NARCANDirect.com: BSHHC has distributed Narcan to the BHS Administrative Team to administer in the event that the health center is closed. In partnership with BHS, the health center has developed a protocol for how staff can support BHS in the event of a suspected opioid overdose when the health center is open.
- Identifying students under the influence with Berkeley High School (BHS) Administration: The BSHHC provides BHS administrative staff with substance use education regarding identifying students under the influence. This yearly training provides BHS staff with the knowledge in identifying students under the influence at BHS events such as Prom.
- Substance Use Education-Provided by BSHHC Staff to clients: The BSHHC provides Health Education on the following:
 - STI/HIV education, testing, and prevention
 - HIV Pre-exposure Prophylaxis (PrEP) and Post-exposure Prophylaxis (PEP) Education and Referrals
 - Alcohol, tobacco, and drug prevention

BACKGROUND

The California State legislature acknowledges that data from the Needle Exchange Programs in the United States and in Europe have shown that syringe exchange does not increase drug use in the population, can serve as an important bridge to treatment and recovery from drug abuse, and can curtail the spread of Human Immunodeficiency Virus (HIV) infection among the intravenous drug user population. Support of SSPs is a Strategic Plan Priority project, advancing our goal to champion and demonstrate social and racial equity.

ENVIRONMENTAL SUSTAINABILITY AND CLIMATE IMPACTS

None.

ALTERNATIVE ACTIONS CONSIDERED

None

CONTACT PERSON

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**NOTICE OF PUBLIC HEARING
BERKELEY CITY COUNCIL
BIENNIAL SYRINGE SERVICES REPORT**

The public may participate in this hearing by remote video or in-person.

Notice is hereby given by the City Council of the City of Berkeley that a public hearing will be conducted by said city council of the City of Berkeley at which time and place all persons may attend and be heard upon the following:

The Department of Health, Housing, and Community Services is providing the Biennial Syringe Services Report.

The hearing will be held on Tuesday, June 27, 2023, at 6 pm at the Berkeley Unified School District Board Room located at 1231 Addison Street, Berkeley CA 94702.

A copy of the agenda material for this hearing will be available on the City’s website at <https://berkeleyca.gov/> as of June 15, 2023. **Once posted, the agenda for this meeting will include a link for public participation using Zoom video technology, as well as any health and safety requirements for in-person attendance.**

For further information, please contact Lisa B. Hernandez, MD, MPH, Health Officer at (510) 981-5300.

Written comments should be mailed or delivered directly to the City Clerk, 2180 Milvia Street, Berkeley, CA 94704, or e-mailed to council@berkeleyca.gov in order to ensure delivery to all Councilmembers and inclusion in the agenda packet.

Communications to the Berkeley City Council are public record and will become part of the City’s electronic records, which are accessible through the City’s website. **Please note: e-mail addresses, names, addresses, and other contact information are not required, but if included in any communication to the City Council, will become part of the public record.** If you do not want your e-mail address or any other contact information to be made public, you may deliver communications via U.S. Postal Service or in person to the City Clerk. If you do not want your contact information included in the public record, please do not include that information in your communication. Please contact the City Clerk at 981-6900 or clerk@berkeleyca.gov for further information.

Published: June 16, 2023 – The Berkeley Voice

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I hereby certify that the Notice for this Public Hearing of the Berkeley City Council was posted at the display case located near the walkway in front of the Maudelle Shirek

[Internal](#) June 27, 2023

Building, 2134 Martin Luther King Jr. Way, as well as on the City's website, on June 15, 2023.

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Mark Numainville, City Clerk