



Photo: Brad Lussier

We try to support users through their relapses and help them get back on track again as part of an overall harm reduction strategy for them that grows out of our concern about the transmission of HIV.

*OITM: Has it been difficult to get people to come to your sites?*

LM: Users are an invisible community, they cut across all demographics and they seldom identify themselves as a group. How do you get the word out about needle exchange to a group that doesn't ever meet together, or consider themselves a community? We work closely with our peer educators but they only know who they know. We don't know how many we have yet to reach.

I think we've had some difficulty getting people to our site because Brattleboro is a small town and people don't feel as safe or as anonymous as they might in a larger city. It takes a lot more trust and a lot of time to build that trust.

*OITM: Have you had better success in Burlington getting people to your site?*

TD: Yes, and Burlington is obviously bigger [than Brattleboro] and maybe less threatening an environment. Plus our site has a lot of contact with people through the treatment side of things. That conduit has really helped us to reach people. We often get several calls a day, usually from people looking for treatment. Since we have a residential component at the Howard Center, I can meet people while they are staying there, and tell them about the needle exchange, and talk about relapse prevention and overdose prevention, too. I try to take that opportunity to tell users that relapse, for many people, is a part of their process of recovery, just like

someone who goes on a diet, or quits smoking. A lot of people have to quit several times before it sticks.

*OITM: Maybe Oprah should host a show ...*

LM: [laughing] Tom's right. The medical research is showing is that the process is not one where someone gets addicted and then stops. It is more likely that this person will get addicted, stop, relapse, and stop again. That seems to be the pattern. Our model of harm reduction says, we will work with you wherever you may be in the recovery process.

### **Money and Politics (The short political history of needle exchange, and the prospects for continued funding)**

*OITM: Let's back up a little. Could the two of you tell us how needle exchange actually got off the ground in Vermont?*

TD: Well, Vermont was lucky in that it had a pre-existing law that allowed pharmacies to sell syringes without a prescription.

LM: One important beginning came out of a certain AIDS Awareness Day at the Vermont State House. That is the day each year when the People with AIDS Coalition, Vermont CARES, the AIDS Project of Southern Vermont and other HIV/AIDS service organizations present their needs and concerns to the legislature. Part of the conversation that particular day involved Howard Dean. At some point, one of the many folks who had been advocating for needle exchange asked

we do not have the numbers on the books yet that will qualify us for further funding. We compete with places in Miami and San Francisco for funds so you can see what we are up against.

TD: Neither of our needle exchanges get any federal, state or local money. In most places, that is not the norm; these sites are supported by state and local government. If these sites are to continue and to be successful, we are going to need to have state and local support, too.

### **What is success?**

*OITM: How do you measure success in these kinds of programs? And does your view of success match the views of your potential funding sources?*

TD: I consider every used syringe or other used injection supplies that we take in, and safely dispose of, is a success. Every time we hand someone clean injection supplies, making it possible for them to avoid HIV and Hepatitis C transmission – that's success. And just making contact with people so that we can help them when they need it. If not now, then sometime down the road. Maybe it is with the criminal justice system because they've gotten arrested, or maybe they need help getting into treatment. You may not know it but getting into treatment is not easy these days. For a lot of folks, it feels like 'I want help and no one will give it to me.' We try to help people past such barriers, and at that, I think we have been very successful.

LM: I agree with Tom. And when I see a user advocating for him or herself, that for me is success.

But the groups who fund needle exchange want numbers, too. They want to know how many people we've seen, how many needles we've given out, how many referrals, etc. Our views of success don't always match up neatly.

*OITM: How would you characterize community response thus far?*

LM: My experience as someone advocating for needle exchange in and around Brattleboro has been overwhelmingly positive. It seems to me that people are quite supportive when they know what they are supporting. But they usually have to be educated before they can be supportive.

There are all sorts of breakthrough moments, but I remember one particularly well. As we were getting ready to open the exchange, I had spoken to our chief of police several times as we were getting the site ready, and he seemed supportive but I didn't really know how much. At one community meeting, he was asked whether he supported this work. And I held my breath, and then he said, "You know, this house [the site where the needle exchange is located] once belonged to my mother. And when I was a little boy, she used to feed hungry folks who came up from the railroad tracks at our back porch. Our neighbors did not like it, but that didn't keep her from doing the right thing. And frankly, I feel like what the AIDS Project and the Needle Exchange are doing is just like what she was about."

*Mark Melchior is a freelance writer who lives in Guilford. You can contact him at marmel@sover.net.*

### **Resources**

Green Mountain Needle Co-op  
Burlington, VT  
802-859-1230

Family and Friends of IDUs Support Group in Burlington  
contact Tom Dalton at The Howard Center for Human Services  
802-859-1230

Brattleboro Needle Exchange  
c/o The AIDS Project of Southern Vermont  
Lynn Martin at 802-254-8263

Vermont Harm Reduction Coalition and the New England Alliance of Methadone Advocates  
contact Alice Diorio at 800-711-8680 or 802-387-8561