

# VOICES FROM THE MOUNTAINS: AIDS and the Illusion of Fiscal Responsibility

Bennett Law

**BETHEL** -- In mid-October the AIDS Program of the Department of Health at long last was allowed to recruit applicants for three federally funded positions established to implement HIV prevention programs in the state of Vermont. A hiring freeze on state employees instituted by the Dean Administration was inexplicably extended, denying the filling of positions funded entirely by federal monies. The Dean Administration's effort to convince Vermonters that it is serious about limiting the size of government only hamstrung efforts to improve the effectiveness of Vermont's AIDS service community. This ill-conceived political strategy, which similarly negatively impacted federally funded positions devoted to cancer, amounted to nothing less than an abdication of its responsibility to protect the public health. Introduction of much needed services in the continuing struggle to halt the spread of HIV infection was unnecessarily delayed.

The Vermont HIV Prevention Community Planning Group (CPG), established and supported entirely with funds provided by the national Center for Disease Control (CDC) operating out of Atlanta, was created to ensure that HIV prevention strategies implemented by the state Department of Health reflect explicit, community-identified needs enunciated by a body "which reflects in its composition the characteristics of the current and projected epidemic" in Vermont. Members are selected to represent the communities at highest risk for HIV infection, including men who have sex with men, injection drug users, women at risk (both as injection drug users and as sexual partners of HIV-infected men), youth at risk, persons of color, people with hemophilia and their sexual partners, and the HIV-infected and their sexual partners. In addition, CDC specified that "the recruitment process for membership (be) proactive to ensure that socioeconomically marginalized groups, and groups that are underserved by existing HIV prevention programs, are represented."

CPG, which has been in operation for nearly two full years, unites people from all over the state living and working at the heart of the battle against new HIV infections. Medical practitioners, mental health professionals, people working in street outreach and corrections programs, clergy, students, teachers, youth counselors, people working with the Red Cross, the Department of Education, Vermont's AIDS service organizations and the AIDS Council, of assorted ages, races, religions, genders, sexual orientations, HIV-positive and the non-infected -- all come together as members of CPG to lend their talents to the battle against new HIV infections in Vermont.

In the September report made to the Community Planning Group of implementation progress of directives emanating from its 1994 plan, an abbreviated list of the projects, recommendations and activities identified as being at least partially "delayed pending hiring of additional staff" included the following:

- \* the provision of technical assistance to providers and potential providers to increase expertise and organizational capacity
- \* establishment of links between primary and secondary prevention service providers

- \* evaluation of Department of Health counseling and testing and public information programs
- \* expansion of hotline hours
- \* development of materials describing testing options and efforts to raise awareness of testing among targeted communities
- \* outreach to domestic violence and abuse victims
- \* increased linkages between programs of the Department of Health and the Office of Alcohol and Drug Abuse
- \* approaches to business leaders/employers in support of HIV prevention including workplace education and employment policies
- \* engagement of clergy and religious communities in support of education and prevention

In its 1995 report to the Centers for Disease Control, the Community Planning Group stated that "the greatest obstacles in integrating the CPG-developed priorities into ongoing program activities and funding have related to the challenge of getting the programs ... up and running." The report went on to state that "state budget shortfalls (that) resulted in severe restrictions on state hiring and contracts created special implementation problems. For example, while the Department of Health was able to issue a vastly increased amount in grants to community organizations for prevention activities, the ability to hire new employees to support these grants through coordination of training and technical assistance activities means that there has been delay in implementing the capacity building and prevention support programs envisioned by the planning group."

Unable to overcome the political hurdles and lines drawn in the sand by an administration struggling to establish itself as responsible, and faced with the possible forfeiture of federal funding, the AIDS Program of the Department of Health negotiated an agreement to secure new staff to perform the CPG's mandates by issuing grants to community-based organizations to hire them. This ultimately allows, after considerable delay, for the implementation of essential grantee support activities, training, and technical assistance, and early intervention activities determined by the CPG to be vital in halting the spread of HIV.

The Dean Administration traded the straightforward and responsible performance of its public health charge for the illusion of fiscal responsibility. The new staff needed to support the HIV prevention efforts recommended by the Community Planning Group are entirely funded by federal monies: not a single penny of state revenue was requested. While the Dean Administration measures its effectiveness in dollars, those of us committed to fighting the spread of HIV in Vermont are measuring the battle in new infections.

In the fight against HIV, time counts. With each passing month additional young people become sexually active for the first time, individuals turn to (or return to) injection drugs, and a host of Vermonters wittingly or unwittingly place themselves at risk for HIV infection. All Vermonters deserve more respectful consideration from our state officials. The Governor and his staff need to realign their priorities to ensure that their nonsensical political maneuverings don't cost Vermonters their futures.

*Bennett Law is a member of the Vermont HIV Prevention Community Planning Group.*

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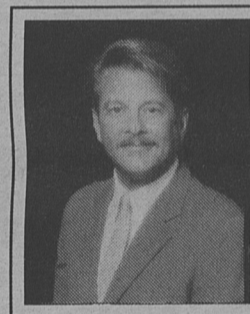
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