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September 26, 1995

Board of Health
Town of Provincetown
260 Commercial Street
Provincetown, MA 02657

Dear Members of the Board of Health:

Responding to a Request for Proposals from the State Department of Public Health for HIV prevention strategies aimed at Injection Drug Users (IDUs), the Provincetown AIDS Support Group, in conjunction with Outer Cape Health Services and the Cape Cod AIDS Council, has submitted a prevention proposal that includes the following goals:

- * Reduction in the spread of HIV in the target population through reduction in shared needles and unsafe sex practices
- * Referrals to HIV Counseling and Testing
- * Referrals to drug treatment (with aggressive advocacy to assure rapid entry into treatment)
- * Referrals to HIV-related case management, social services advocacy and medical treatment, where appropriate.

These goals will be achieved using the following methods:

- * **PASG Capacity Building.** Training for volunteers and other program participants through state DPH technical assistance, the Southeastern Massachusetts Area Health Education Center, and creation of an ongoing continuing education program for PASG staff and volunteers utilizing the skills and experience of collaborating substance abuse treatment agencies.
- * **Targeted Outreach.** Identification of at-risk IDU population, as well as sub-populations, such as steroid users and women at risk due to sex partners.
- * **Community-level Interventions.** Development of materials and messages for use in the local media about injection drug use and HIV risk and service availability. Using culturally relevant language, these messages will reach users in the home, as well as those with more public use habits, and will be

designed for impact regardless of the user's state of awareness on the risks of drug use and HIV transmission. Printed materials will also be displayed at a variety of locations to be determined in collaboration with OCHS and CCAC, and could include bars and clubs, gyms, clinics, and other service providers.

- * Prevention and Education Skills Development Training. Building on PASG's existing educational activities, we will add prevention and education efforts for the target group to include specific trainings -- in local schools and youth groups, for example -- geared to those at risk due to injection drug use or unprotected sex with an injection drug using partner and one-on-one instruction on an as-needed basis.
- * Prevention Counseling and Mental Health Strategies. This will include reinforcement of prevention message and substance abuse messages through provision of written materials as well as through professionally facilitated support groups focusing on the educational, treatment, self-help and supportive resources available to deal with the unsafe behavior of drug use.
- * Needle Exchange. The provision of clean needles serves a dual purpose: 1) it is the key element in reducing the spread of HIV among IDUs; and 2) it is the key to reaching this high-risk, difficult to access population and to maintaining that relationship long enough to effect changes in behavior and make referrals to services.

Understandably, the needle exchange part of this program has gotten the most attention. As stated previously, needle exchange will be critical to risk reduction among IDU's as well as introducing this population to available services. This program will replicate proven models for needle exchange and will conform to the Massachusetts Department of Public Health (MDPH) guidelines. The program will focus on the early stages of change through relational development and consistent information dissemination regarding risks and service availability.

The basic policies for the program have been developed in consultation with state and local health and law enforcement officials, with an eye to Boston's successful AHOPE program. The minimum age requirement for participation in the program will be eighteen. This information will be obtained at the time of intake.

Also at intake, a code number will be established and an identification card issued to the enrollee. The number will be used to track number of visits, number of needles exchanged at each visit, and referrals made in accordance with MDPH's required reporting and evaluation procedures. Participants will be given printed information as well as a verbal explanation of how the program works and their responsibilities as participants. While intended to be brief, the intake as well as subsequent interactions will always address any existing questions or concerns around both HIV risk and availability of treatment. Condoms, bleach kits, cookers and a listing of local providers will be given out at intake and subsequent exchanges.

PASG intends to use one of its transportation vans for fixed site distribution in the community. IDU's very much in the closet with their habit are more likely to approach a vehicle anonymously than to enter the PASG or other offices during business hours.

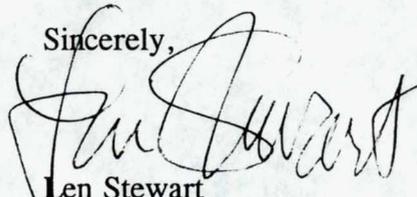
A number of volunteers, including several local residents with hands on experience at an existing needle exchange programs, have already come forward to help staff this aspect of the program. Clients with a history of injection drug use have also indicated a willingness to be involved. Additionally, training will be provided to all staff and volunteers in the program to ensure continuity, conformity, and safety. Volunteers will be briefed on any associated risks and will be offered TB testing and/or Hepatitis B vaccinations through the Town Nurse's office or OCHS. The staff person coordinating the program will be available to all volunteers of the program.

The involved agencies -- PASG, OCHS and CCAC -- have a history of service provision to the HIV affected community; the goal of reducing the spread of HIV is an integral part of each agency's mission. The introduction of the above programs will expand greatly the network of services while targeting a difficult to access population at high risk for HIV infection. We are well situated to make referrals to area providers of both substance abuse and HIV related services.

Of course, we plan to continue to work the Massachusetts Department of Public Health and local health and law enforcement officials on this to assure that the program meets its goals. As part of the Department of Public Health's requirements, we have asked for and received the endorsement of the Board of Selectmen for this undertaking.

Thanks. Please let us know if we can provide you with additional information on this.

Sincerely,



Len Stewart
Executive Director

cc: Board of Selectmen
PASG Board of Directors
PASG Consumer Advisory Board
Outer Cape Health Services