

Opioid Crisis Bill
House Human Services Committee
Testimony - Vermont AIDS Services Organizations – Theresa Vezina, VT CARES
March 10, 2022

Syringe Service Programs (SSP) have been an integral part of harm reduction services in Vermont for decades. Vermont CARES, AIDS Project of Southern VT, H2RC and Safe Recovery, together, serve the entire state with both onsite and mobile service programs. These organizations have built sustainable infrastructures, programming, policies, community partnerships and, most importantly, trust within the populations most at risk. It has taken a combined effort over more than 30 years to build these networks – networks that saves lives every day.

Each of our programs struggles to meet the needs of Vermonters suffering with opioid use disorder due to limited funding, making it impossible to expand in ways that we are ready and willing to do. We listen to the needs of those we work with, and we know there is more they need from us. We are asking you to help us to help them. Funding for, and expansion of, harm reduction services should be directed towards existing organizations operating SSPs.

Harm Reduction

Harm reduction is more than the provision of syringes, Narcan, and drug testing kits. It is about building relationships and trust with those we serve, the community, and our partners. It has taken decades for harm reduction to be recognized for what it is. We have been guided by best practices based in science, public health and harm reduction philosophy and strategy.

Peer-Based Services

As SSP providers, we have always utilized peer-based delivery models, through both secondary exchange and more structured peer outreach worker programs. During the pandemic, all our services were primarily mobile and peer-based delivered. We've been able to bring that model more fully into our work and continue to grow that area of our services.

It is our position that the implementation of peer-based delivery models should be embedded in existing SSP's for consistency and sustainability. Most importantly, it should give people a place to connect to providers when they are ready to access the expanse of services offered at SSP's. As AIDS Service Organizations and treatment providers, we are able to support individuals who are using injection drugs with free HIV and HCV testing, referrals to medication-assisted treatment, recovery services, case management and more. All four of Vermont's SSPs have rapid access, low barrier medication-assisted treatment embedded within our programs. The kind of services I mention here can only be accessed when working with program staff. Unfortunately, peers would not be able to do that level of work with other peers unless we were able to hire them and provide the necessary training, which would be a dream come true.

Quite honestly, peers are the unpaid heroes that are helping to save the lives of their friends, loved ones and neighbors. The need for peers in connecting other peers to services is invaluable. It is the greatest asset that any SSP has. Some questions that arise for me, if peer-based delivery

of services moves forward, are: Will peers be paid an equitable wage for their work? Will additional funding go to support peer-based delivery models?

Additional funding

With additional funding to the existing SSPs (such as you provided in your recommendation to House Appropriations), we can continue to build out programs to enhance our existing peer-based work, pay peers for their time and efforts, partner with other community-based organizations in rural areas by providing them with harm reduction training, technical assistance, and share the lessons learned of the last three decades. We can reach more people and expand access by investing in what we know works.

You have already invested in the current infrastructure that the Vermont Health Department has developed - and one that we know is working well. We work alongside our state leaders in public health to continue to innovate and expand access. We ask that you continue to support the growth of existing SSPs so we can together reach those most in need through a variety of options, in diverse geographic areas, across all socioeconomic backgrounds.